| Fill in this information to identify your case: |                               |                                 |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                               |                                 |
| NORTHERN DISTRICT OF OHIO                       | -                             |                                 |
| Case number (if known)                          | Chapter you are filing under: |                                 |
|   | Chapter 7                     |                                 |
|   | Chapter 11                    |                                 |
|   | Chapter 12                    |                                 |
|   | ✓ Chapter 13                  | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Identify Yourself** Part 1: **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on **Brian** your government-issued First name First name picture identification (for example, your driver's license or passport). Middle name Middle name Bring your picture Janusek identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal xxx-xx-6634 **Individual Taxpayer** Identification number (ITIN)

|    |  | About Debtor 1:   |   | About Debtor 2 (Spouse Only in a Joint Case):  |  |  |
|----|--|---|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ✓ I have not used any business name or EINs.  |   | ☐ I have not used any business name or EINs.  Business name(s)   |  |  |
|    | doing business as names  |   |   |  |  |  |
|    |  | EINs  |   | EINs   |  |  |
| 5. | Where you live   | 154 Substation Road   |   | If Debtor 2 lives at a different address:  |  |  |
|    |  | Brunswick Hills, OH 44212  Number, Street, City, State & ZIP Code   | - | Number, Street, City, State & ZIP Code   |  |  |
|    |  | Medina  |   |  |  |  |
|    |  | County  |   | County   |  |  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. |   | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |  |  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | _ | Number, P.O. Box, Street, City, State & ZIP Code   |  |  |
| 6. | Why you are choosing this district to file for   | Check one:  |   | Check one:   |  |  |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                |   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |  |  |
|    |  | I have another reason. Explain. (See 28 U.S.C. § 1408.)   |   | I have another reason. Explain. (See 28 U.S.C. § 1408.)  |  |  |
|    |  |   |   |  |  |  |

| Deb | tor 1 Brian J. Janusek  |   |  | Case number (if known)  |                                |  |  |  |
|-----|---|---|--|---|--------------------------------|--|--|--|
|     | <u> </u>  |   |  |   |                                |  |  |  |
| Par | Tell the Court About  | Your Bankruptcy Case  |  |   |                                |  |  |  |
| 7.  | The chapter of the Bankruptcy Code you are  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. |  |   |                                |  |  |  |
|     | choosing to file under  | Chapter 7   |  |   |                                |  |  |  |
|     |   | Chapter 11  |  |   |                                |  |  |  |
|     |   | Chapter 12  |  |   |                                |  |  |  |
|     |   | ✓ Chapter 13  |  |   |                                |  |  |  |
| 8.  | How you will pay the fee  | about how you may pay. order. If your attorney is a pre-printed address.  I need to pay the fee in  | Typically, if you are paying the fee yo submitting your payment on your beha- installments. If you choose this optic | k with the clerk's office in your local court for ourself, you may pay with cash, cashier's che alf, your attorney may pay with a credit card on, sign and attach the Application for Individ             | eck, or money<br>or check with |  |  |  |
|     |   | I request that my fee be but is not required to, wa applies to your family siz  | live your fee, and may do so only if yo e and you are unable to pay the fee in                                       | n only if you are filing for Chapter 7. By law, a<br>ur income is less than 150% of the official po<br>n installments). If you choose this option, you<br>cial Form 103B) and file it with your petition. | overty line that               |  |  |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | ✓ No.  Yes.   |  |   |                                |  |  |  |
|     | ·   | District  | When   | Case number   |                                |  |  |  |
|     |   | District  | When   | Case number   |                                |  |  |  |
|     |   | District  | When   | Case number   |                                |  |  |  |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No ☐ Yes.   |  |   |                                |  |  |  |
|     |   | Debtor  |  | Relationship to you   |                                |  |  |  |
|     |   | District  | When   | Case number, if known   |                                |  |  |  |
|     |   | Debtor  |  | Relationship to you   |                                |  |  |  |
|     |   | District  | When   | Case number, if known   |                                |  |  |  |
| 11. | Do you rent your residence?   | ✓ No. Go to line 12.  ☐ Yes. Has your landlord  ☐ No. Go to I   | obtained an eviction judgment agains   | t you?  |                                |  |  |  |

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

| Deb  | tor 1 Brian J. Janusek  |                        | Case number (if known)   |
|------|---|------------------------|--|
|      |   |                        |  |
| Part | 3: Report About Any Bu  | sinesses               | You Own as a Sole Proprietor   |
| 12.  | Are you a sole proprietor of any full- or part-time business?   | <b>№</b> No.           | Go to Part 4.  |
|      |   | Yes.                   | Name and location of business  |
|      | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name of business, if any   |
|      | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Number, Street, City, State & ZIP Code   |
|      | it to this petition.  |                        | Check the appropriate box to describe your business:   |
|      |   |                        | Health Care Business (as defined in 11 U.S.C. § 101(27A))  |
|      |   |                        | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  |
|      |   |                        | Stockbroker (as defined in 11 U.S.C. § 101(53A))   |
|      |   |                        | Commodity Broker (as defined in 11 U.S.C. § 101(6))  None of the above   |
|      |   |                        |  |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | deadlines<br>operation | e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate so. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of as, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B). |
|      | - 10 W  | <b>✓</b> No.           | I am not filing under Chapter 11.  |
|      | For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).   | ☐ No.                  | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.   |
|      |   | Yes.                   | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  |
| Part | 4: Report if You Own or   | Have Any               | Hazardous Property or Any Property That Needs Immediate Attention  |
|      | Do you own or have any property that poses or is alleged to pose a threat of imminent and   | ✓ No.  Yes.            | What is the hazard?  |
|      | identifiable hazard to<br>public health or safety?<br>Or do you own any   |                        |  |
|      | property that needs immediate attention?  |                        | If immediate attention is needed, why is it needed?  |
|      | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?   |                        | Where is the property?   |
|      |   |                        | Number, Street, City, State & Zip Code   |
|      |   |                        |  |

Debtor 1 Brian J. Janusek

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credi |
|---|
| counseling because of:                              |

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb  | tor 1 Brian J. Janusek  | Case number (if known)  |
|------|---|---|
| Part | 6: Answer These Questi  | ns for Reporting Purposes   |
| 16.  | What kind of debts do you have?   | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."   |
|      |   | No. Go to line 16b.   |
|      |   | ✓ Yes. Go to line 17.   |
|      |   | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.   |
|      |   | No. Go to line 16c.   |
|      |   | Yes. Go to line 17.   |
|      |   | 16c. State the type of debts you owe that are not consumer debts or business debts  |
| 17.  | Are you filing under<br>Chapter 7?  | No. I am not filing under Chapter 7. Go to line 18.   |
|      | Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No Yes  |
| 18.  | How many Creditors do you estimate that you owe?  |   |
| 19.  | How much do you estimate your assets to be worth?   | \$0 - \$50,000  |
| 20.  | How much do you estimate your liabilities to be?  | \$0 - \$50,000  |
| Part | 7: Sign Below   |   |
| For  | you   | have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  |
|      | •   | f I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11,<br>Jnited States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.                                 |
|      |   | f no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).   |
|      |   | request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  |
|      |   | understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571.  Is/ Brian J. Janusek |
|      |   | Brian J. Janusek Signature of Debtor 2  |
|      |   | Executed on March 12, 2019 Executed on MM / DD / YYYY   |

| Debtor 1 | Brian J. Janusek | Case number (if known) |  |
|----------|------------------|------------------------|--|
|          |                  |                        |  |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ David M. Benson                    | Date          | March 12, 2019           |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor       |               | MM / DD / YYYY           |
| David M. Benson 0062540                |               |                          |
| Printed name                           |               |                          |
| Benson Law Firm                        |               |                          |
| Firm name                              |               |                          |
| 1422 Euclid Avenue                     |               |                          |
| Suite 970                              |               |                          |
| Cleveland, OH 44115                    |               |                          |
| Number, Street, City, State & ZIP Code |               |                          |
| Contact phone <b>216-241-2510</b>      | Email address | David@DavidBensonLaw.com |
| 0062540 OH                             |               |                          |
| Day number 9 Ctate                     |               |                          |

| Fill i        | n this inform                 | ation to identify your                          | case:  |  |            |                                    |
|---------------|-------------------------------|---|--|--|------------|------------------------------------|
| Debt          |                               | Brian J. Janusek                                |  |  |            |                                    |
|               | _                             | First Name                                      | Middle Name  | Last Name  |            |                                    |
| Debt<br>(Spou | or 2<br>se if, filing)        | First Name                                      | Middle Name  | Last Name  |            |                                    |
| Unite         | ed States Ban                 | kruptcy Court for the:                          | NORTHERN DISTRIC   | r of ohio  |            |                                    |
|               | e number                      |   |  |  |            |                                    |
| (if kno       | wn)                           |   |  |  | _          | Check if this is an amended filing |
|               |                               |   |  |  |            | amenaea ming                       |
| ∩ff           | icial For                     | m 106Sum  |  |  |            |                                    |
|               |                               |   | and Liabilities a  | nd Certain Statistical Informatio  | n          | 12/15                              |
| infor         | mation. Fill of original form | ut all of your schedule                         | es first; then complete t                                  | e are filing together, both are equally responsibl<br>he information on this form. If you are filing ame<br>k the box at the top of this page. |            |                                    |
|               |                               |   |  |  | Y          | our assets                         |
|               |                               |   |  |  |            | alue of what you own               |
| 1.            | Schedule A/I<br>1a. Copy line | <b>B: Property</b> (Official Fo                 | orm 106A/B)<br>om Schedule A/B                             |  | \$         | 560,000.00                         |
|               | 1b. Copy line                 | 62, Total personal prop                         | perty, from Schedule A/B.                                  |  | \$         | 180,040.39                         |
|               | 1c. Copy line                 | 63, Total of all property                       | on Schedule A/B  |  | \$         | 740,040.39                         |
| Part          | 2: Summa                      | rize Your Liabilities                           |  |  |            |                                    |
|               |                               |   |  |  |            | our liabilities<br>mount you owe   |
|               |                               |   | aims Secured by Propert<br>nn A, Amount of claim, at       | y (Official Form 106D)<br>the bottom of the last page of Part 1 of <i>Schedule D</i>   | ) \$       | 274,908.88                         |
|               |                               |   | Unsecured Claims (Official)<br>1 (priority unsecured clair | al Form 106E/F)<br>ns) from line 6e of <i>Schedule E/F</i>   | \$         | 0.00                               |
|               | 3b. Copy the                  | total claims from Part                          | 2 (nonpriority unsecured                                   | claims) from line 6j of Schedule E/F   | \$         | 0.00                               |
|               |                               |   |  | Your total liabilit  | ies \$     | 274,908.88                         |
| Part          | 3: Summa                      | rize Your Income and                            | Evnoncos   |  |            |                                    |
|               |                               |   | -  |  |            |                                    |
|               |                               | our Income (Official Formbined monthly income   |  | e /  | \$         | 8,170.05                           |
|               |                               | Your Expenses (Official onthly expenses from li |  |  | \$         | 3,296.69                           |
| Part          | 4: Answer                     | These Questions for                             | Administrative and Stat                                    | tistical Records   |            |                                    |
| 6.            | •                             |   | er Chapters 7, 11, or 13?<br>on this part of the form. C   | P<br>Check this box and submit this form to the court with   | your oth   | er schedules.                      |
|               | ■ Yes                         |   |  |  |            |                                    |
| 7.            | What kind of                  | debt do you have?                               |  |  |            |                                    |
|               |                               |   |  | debts are those "incurred by an individual primarily 9g for statistical purposes. 28 U.S.C. § 159.   | for a pers | sonal, family, or                  |

the court with your other schedules.

page 1 of 2

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Official Form 106Sum

Best Case Bankruptcy

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_\_7,499.98

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total claim |      |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

| Debtor 1   | Brian J. Jan                                     |                        | Name and American   |  |  |
|--|--|------------------------|---|--|--|
| Debtor 2   | First Name                                       | Middle                 | Name Last Name  |  |  |
| Spouse, if filing)   | First Name                                       | Middle                 | Name Last Name  |  |  |
| Jnited States  | Bankruptcy Court for                             | the: NORTHER           | N DISTRICT OF OHIO  |  |  |
| Case number  |  |                        |   |  | ☐ Check if this is a amended filing  |
|  |  |                        |   |  | -  |
|  | orm 106A/E                                       | _                      |   |  |  |
| schedu   | ule A/B: P                                       | roperty                |   |  | 12/15  |
| nswer every q  | uestion.   | ·                      | heet to this form. On the top of any additional pag<br>her Real Estate You Own or Have an Interest In   | <u>.</u>   |  |
| Do you own   | or have any legal or ed                          | quitable interest in a | ny residence, building, land, or similar property?  |  |  |
| ☐ No. Go to  | Part 2.  |                        |   |  |  |
| _  |  |                        |   |  |  |
| Yes. Whe   | re is the property?                              |                        |   |  |  |
| .1<br><b>154 Sul</b>   | bstation Road                                    | scription              | What is the property? Check all that apply  ■ Single-family home  |  | laims or exemptions. Put<br>ed claims on <i>Schedule D:</i>  |
| 1.1<br><b>154 Sul</b>  |  | scription              |   | the amount of any secur  | laims or exemptions. Put<br>ed claims on <i>Schedule D:</i><br>ims Secured by Property.  |
| 154 Sul<br>Street addre  | bstation Road<br>ess, if available, or other des |                        | ■ Single-family home  □ Duplex or multi-unit building  □ Condominium or cooperative  □ Manufactured or mobile home  | the amount of any secur<br>Creditors Who Have Cla  | ed claims on Schedule D:<br>ims Secured by Property.  Current value of the   |
| .1 154 Sul<br>Street addre   | bstation Road                                    | 44212-0000<br>ZIP Code | Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  Land  | the amount of any secur<br>Creditors Who Have Cla<br>Current value of the<br>entire property?  | ed claims on Schedule D:<br>ims Secured by Property.  Current value of the<br>portion you own?   |
| 154 Sul<br>Street addre  | ostation Road<br>ess, if available, or other des | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare   | the amount of any secur Creditors Who Have Cla  Current value of the entire property?  \$560,000.00  | ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$560,000.00   |
| .1  154 Sult Street addre  | ostation Road<br>ess, if available, or other des | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other   | Current value of the entire property? \$560,000.00  Describe the nature of (such as fee simple, tel  | ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$560,000.00  your ownership interest                             |
| .1  154 Sult Street addre  | ostation Road<br>ess, if available, or other des | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare   | Current value of the entire property? \$560,000.00  Describe the nature of   | ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$560,000.00  your ownership interest                             |
| .1  154 Sult Street addre  | bstation Road ess, if available, or other des    | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one   | Current value of the entire property?  \$560,000.00  Describe the nature of (such as fee simple, ter a life estate), if known.   | ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$560,000.00  your ownership interest                             |
| 154 Sult Street addre  | bstation Road ess, if available, or other des    | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Current value of the entire property? \$560,000.00  Describe the nature of (such as fee simple, te a life estate), if known.  Fee simple   | ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own? \$560,000.00  your ownership interest nancy by the entireties, of |
| 1.1  154 Substitute of the state of the stat | bstation Road ess, if available, or other des    | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only   | the amount of any secur Creditors Who Have Classes Current value of the entire property?  \$560,000.00  Describe the nature of (such as fee simple, tea life estate), if known.  Fee simple  Check if this is con (see instructions) | current value of the portion you own?  \$560,000.00  your ownership interest nancy by the entireties, o  |
| 1.1  154 Substitute of the state of the stat | bstation Road ess, if available, or other des    | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this i | the amount of any secur Creditors Who Have Classes Current value of the entire property?  \$560,000.00  Describe the nature of (such as fee simple, tea life estate), if known.  Fee simple  Check if this is con (see instructions) | current value of the portion you own?  \$560,000.00  Source of the portion you own?  \$560,000.00  Sour ownership interest nancy by the entireties, o      |
| 1.1  154 Substitute of the state of the stat | bstation Road ess, if available, or other des    | 44212-0000             | Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other  Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this i | the amount of any secur Creditors Who Have Classes Current value of the entire property?  \$560,000.00  Describe the nature of (such as fee simple, tea life estate), if known.  Fee simple  Check if this is con (see instructions) | current value of the portion you own?  \$560,000.00  Source of the portion you own?  \$560,000.00  Sour ownership interest nancy by the entireties, o      |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Carry, vans, trucks, tractors, sport utility vehicles, motorcycles    No   | Debto                     | or 1 <u>B</u>                    | rian J. Jani                   | usek                                       |  | Case number (if known)       |                             |
|--|---------------------------|----------------------------------|--------------------------------|--|--|------------------------------|-----------------------------|
| Nake:   Ford   Who has an interest in the property? Ciscel are   Do not deduct secured claims or everagions. Put   Confidence Who National Claims Succeed by Property.   | . Cai                     | rs, vans,                        | trucks, tract                  | ors, sport utility ve                      | hicles, motorcycles                              |                              |                             |
| Nake:   Ford   Who has an interest in the property? Ciscel are   Do not deduct secured claims or everagions. Put   Confidence Who National Claims Succeed by Property.   |                           |                                  |                                |  |  |                              |                             |
| Make:   Ford   Who has an interest in the property? Check one   Do not deduct secured claims or exemptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured claims or sceneptions. Put the amount of any secured size or schedule or Condition   Do not deduct secured claims or exemptions. Put the scene of the debtors and another   Correct or subject or scene   Do not deduct secured claims or exemptions. Put the amount of any secured claims or ex   | ЦΝ                        | No                               |                                |  |  |                              |                             |
| Model: F350   Debtor 1 only   Create one   Debtor 2 only   Create one  | <b>•</b> \                | ⁄es                              |                                |  |  |                              |                             |
| Model: F350   Debtor 1 only   Create one   Debtor 2 only   Create one  |                           |                                  |                                |  |  |                              |                             |
| Model   F350     Decision 1 only   Correlitors With Enter Status Secured by Processing   | 3.1                       | Make:                            | Ford                           |  | Who has an interest in the property? Check one   |                              |                             |
| Approximate mileage: 80000   Chee information:   At least one of the declors and another   S24,099.00   \$24,099.00  |                           | Model:                           | F350                           |  | ■ Debtor 1 only                                  |                              |                             |
| Check if this is community property (see instructions)    Check if this is community property (see instructions)   Check if this is community property (see instructions)   Check if this is community property (see instructions)   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Check if this is community property   Current value of the protion you own?   Courrent value  |                           | Year:                            | 2013                           |  | Debtor 2 only                                    | Current value of the         | Current value of the        |
| Check if this is community property   S24,099.00   \$24,099.00   \$24,099.00   |                           | Approxin                         | nate mileage:                  | 80000                                      | Debtor 1 and Debtor 2 only                       | entire property?             | portion you own?            |
| Check if this is community property (see issurance continues)   S24,099.00   S24,099.00   S24,099.00   |                           |                                  |                                |  | ☐ At least one of the debtors and another        |                              |                             |
| Make:   Ford   Who has an interest in the property? Check one   Do not deduct secured claims or exemptions. Put the amount of any secured claim or exemptions. Put the amount of any secured claims or exemptions or exemptions or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions or exemptions. Put the amount of any secured claims or exemptions. Put the a   |                           | Good                             | condition                      |  | _  | \$24.000.0r                  | 0 \$24,000,00               |
| Security  |                           |                                  |                                |  |  | Ψ24,099.00                   | <u>\$24,099.00</u>          |
| Mode: Explorer   Year   2013   |                           |                                  |                                |  | (See mendens)                                    |                              |                             |
| Model: Explorer   Year: 2013   |                           |                                  |                                |  |  | Do not doduct socuro         | d claims or examptions. But |
| Debtor 2 only   Debtor 3 only   S15,280.00   \$15  | 3.2                       | Make:                            |                                |  | Who has an interest in the property? Check one   |                              |                             |
| Approximate mileage: 80000 Other information: Good condition Check if this is community property (see instructions)  Who has an interest in the property? Check one (see instructions)  Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims or schedule Dr. Creditors Who Privace Claims Secured by Property.  Good condition  Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boals, trailers, motors, personal watercraft, lishing vessels, snowmobiles, motorcycle accessories  Examples: Describe Your Personal and Household Items  Or you own or have any legal or equitable interest in any of the following items?  Examples: Major appliances, furniture, linens, china, kitchenware    No   Yes   Current value of the portion you own?  |                           | Model:                           | Explorer                       |  | ■ Debtor 1 only                                  | Creditors Who Have           | Claims Secured by Property. |
| Cither information:  Good condition  Check if this is community property (see instructions)  Check if this is community property (see instructions)  Who has an interest in the property? Check one Debtor 1 and Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Current value of the entire property?  Current value of the entire property?  At least one of the debtors and another  Codd condition  Check if this is community property At least one of the debtors and another Codd condition  Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  At least one of the debtors and another Current value of the entire property?  At least one of the debtors and another Current value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.  Add the dollar value of the portion you own? Do not deduct secured claims or exemptions.  Examples: Major appliances, furniture, linens, china, kitchenware  Household: Furniture  Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games  |                           | Year:                            | 2013                           |  | Debtor 2 only                                    | Current value of the         | Current value of the        |
| Good condition    Cheek if this is community property (see instructions)   \$15,280.00   \$15,280.00   |                           | Approxin                         | nate mileage:                  | 80000                                      | ☐ Debtor 1 and Debtor 2 only                     | entire property?             | portion you own?            |
| Check if this is community property (see instructions)   S15,280.00  |                           | Other inf                        | formation:                     |  | At least one of the debtors and another          |                              |                             |
| 3.3 Make: Mahindra Who has an interest in the property? Check one Model: 3016 Check on Model:   |                           | Good                             | condition                      |  | _  | ¢15 200 0                    | 0 645 200 00                |
| Makindra   |                           |                                  |                                |  |  | φ15,260.0t                   |                             |
| Model: 3016   Debtor 1 only   Ceditors Who Have Claims Secured dams on Schedule D: Creditors Who Have Claims Secured dams on Schedule D: Creditors Who Have Claims Secured by Property.  Approximate mileage: 370 hours   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Current value of the entire property?   At least one of the debtors and another   Check if this is community property   \$15,000.00   \$15,000.00    Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories   Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories   No   Yes    Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here   |                           |                                  |                                |  | (See Heliacione)                                 |                              |                             |
| Model: 3016   Debtor 1 only   Current value of the entire property?   Current value of the entire property?   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 8 only   Debtor 9 only   Debtor 1 only  |                           |                                  | Makindua                       |  |  | Do not deduct secure         | d claims or exemptions. Put |
| Year: 2013   Debtor 2 only   Current value of the entire property?   Approximate mileage: 370 hours   Debtor 1 and Debtor 2 only   Debtor 1 see instructions   At least one of the debtors and another      Check if this is community property   \$15,000.00   \$15,000.00     Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories   Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories     No   | 3.3                       | Make:                            |                                |  | Who has an interest in the property? Check one   | the amount of any sec        | cured claims on Schedule D: |
| Approximate mileage: 370 hours   Debtor 1 and Debtor 2 only entire property?   S15,000.00   S15,000.00      At least one of the debtors and another   Christian Structions   Check if this is community property   S15,000.00   S15,000.00     Check if this is community property   S15,000.00   S15,000.00     Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories   Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories     No  |                           | Model:                           |                                |  | ,  | Creditors Who Have           | Claims Secured by Property. |
| Other information: Good condition Check if this is community property \$15,000.00 \$15,000 |                           |                                  |                                |  | Debtor 2 only                                    | Current value of the         | Current value of the        |
| Good condition    Check if this is community property   \$15,000.00   \$15,000.00     Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories   Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories   No   |                           |                                  | =                              | 370 hours                                  | ☐ Debtor 1 and Debtor 2 only                     | entire property?             | portion you own?            |
| Check if this is community property   \$15,000.00   \$15,000.00  |                           |                                  |                                |  | At least one of the debtors and another          |                              |                             |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  No Yes  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here  |                           | Good                             | condition                      |  | _  | \$45.000.0                   | 0 645,000,00                |
| Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories  Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  No  Yes  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here   |                           |                                  |                                |  |  | \$15,000.00                  | <u> </u>                    |
| Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories  No Yes  Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here  |                           |                                  |                                |  | (see instructions)                               |                              |                             |
| portion you own? Do not deduct secured claims or exemptions.  Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware  No  Yes. Describe  Household: Furniture  \$5,000.00  Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games   | ■ N<br>□ N<br>5 Ac<br>.pa | ·<br>/es<br>Id the do<br>ges you | ollar value of<br>have attache | the portion you ow<br>ed for Part 2. Write | n for all of your entries from Part 2, including | g any entries for            | \$54,379.00                 |
| Do not deduct secured claims or exemptions.  Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware  No  Yes. Describe  Household: Furniture  \$5,000.00  Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games  | Do yo                     | ou own c                         | or have any le                 | egal or equitable in                       | terest in any of the following items?            |                              |                             |
| Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware  No  Yes. Describe  Household: Furniture  \$5,000.00  Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games   |                           |                                  |                                |  |  |                              | Do not deduct secured       |
| Household: Furniture \$5,000.00  Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games   | Ex                        | amples:<br>No                    | Major applian                  |  | , china, kitchenware                             |                              | dame of exemptions.         |
| Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games  | _                         | res. De                          | SCHDE                          |  |  |                              |                             |
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games   |                           |                                  |                                | Household: Fur                             | niture   |                              | \$5,000.00                  |
| including cell phones, cameras, media players, games   |                           |                                  |                                | nd radios: audio vid                       | on stores and digital aguisment; computers as    | intore coannore: music calle | petione: electronic devices |
|  | ĽΧ                        |                                  |                                |  |  | micro, ocarinero, music cone | onona, electronic devices   |
|  |                           |                                  |                                | r , oamorao, 11                            | p.wy 0.0; gw00                                   |                              |                             |

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Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

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| Debtor 1                                   | Brian J. Ja  | nusek Case number (if known   | n)  |
|--|--|---|---|
| ■ Yes                                      | . Describe   |   |   |
|  |  | Electronics: computer, video game, tvs  | \$3,000.00  |
| Examp<br>■ No                              |  | nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, contributions, memorabilia, collectibles | n, or baseball card collections;  |
| Examp  No                                  | nent for sports<br>oles: Sports, pho<br>musical ins                      | tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe  | s and kayaks; carpentry tools;  |
| ☐ No                                       |  | les, shotguns, ammunition, and related equipment  |   |
|  |  | Firearms: Guns  | \$3,500.00  |
| □ No                                       |  | clothes, furs, leather coats, designer wear, shoes, accessories   | <b>^~ ~~</b> -~   |
|  |  | Clothes: Clothes  | \$3,500.00  |
| □ No                                       |  | jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems  | gold, silver  |
|  |  | Jewelry: Wedding rings  | \$5,000.00  |
| Exam<br>■ No<br>□ Yes<br>14. Any o<br>■ No | arm animals hples: Dogs, cats Describe hther personal a Give specific in | and household items you did not already list, including any health aids you did not list  |   |
|  |  | e of all of your entries from Part 3, including any entries for pages you have attached at number here                                    | \$20,000.00   |
| Part 4: Do                                 | escribe Your Fina  | ancial Assets   |   |
| Do you o                                   | wn or have any   | r legal or equitable interest in any of the following?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No                                       | nples: Money you   | u have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet  | ition   |
| ☐ Yes<br>Official For                      |  | Schedule A/B: Property  | page 3  |

Best Case Bankruptcy

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| ebtor 1 Brian J. Jan                    | usek   |  | Case number (if known)  |   |
|---|--|--|---|---|
|   |  |  |   |   |
| Deposits of money Examples: Checking, s | savings, o   | r other financial acc  | counts: certificates of deposit: shares in credit unions, brokerage houses, ar  | nd other similar  |
| institutions.                           |  |  |   |   |
|   |  |  | Institution name:   |   |
| ■ Yes                                   |  |  | mondion name.   |   |
|   | 17 1   | Checking   | Firefighter Community Credit Union  | \$1,465.00  |
|   |  |  |   | ,,  |
|   |  |  |   | 4   |
|   | 17.2.  | Checking   | Firefighter Community Credit Union  | \$0.00  |
|   |  |  |   |   |
|   | 17.3.  | Savings  | Firefighter Community Credit Union  | \$5.00  |
|   |  |  |   |   |
|   |  |  | rokerage firms, money market accounts   |   |
| ■ No                                    |  |  |   |   |
| ☐ Yes                                   |  | Institution or issue   | r name:   |   |
|   | tock and   | interests in incorp  | porated and unincorporated businesses, including an interest in an LL   | C, partnership, and   |
| ■ No                                    |  |  |   |   |
| ☐ Yes. Give specific in                 | formation  | about them   |   |   |
|   | Na   | me of entity:  | % of ownership:   |   |
|   |  |  |   |   |
|   |  |  |   |   |
| ■ No                                    |  |  |   |   |
| ☐ Yes. Give specific inf                | ormation   | about them   |   |   |
|   | Iss  | uer name:  |   |   |
|   |  |  | 403(b), thrift savings accounts, or other pension or profit-sharing plans   |   |
| □ No                                    |  |  |   |   |
| Yes. List each accou                    |  | •  | Institution name:   |   |
|   | туре   | or account.  | institution name.   |   |
|   | Pens   | sion   | Ohio Police & Fire Pension Fund   | \$92,191.39   |
|   |  |  |   |   |
|   |  |  | to that you may continue service or use from a company  |   |
|   |  |  |   | iers  |
| No                                      |  |  |   |   |
| ☐ Yes                                   |  |  | Institution name or individual:   |   |
| Annuities (A contract f                 | or a perio   | dic payment of mor   | ney to you, either for life or for a number of years)   |   |
| ■ No                                    | scuor nam  | o and description  |   |   |
| ☐ Yes                                   | ssuer nam  | ie and description.  |   |   |
|   |  |  | qualified ABLE program, or under a qualified state tuition program.   |   |
| ■ No                                    | JEUM(U),   | and 020(D)(1).   |   |   |
|   | nstitution i   | name and description   | on. Separately file the records of any interests.11 U.S.C. § 521(c):  |   |
| Trusts, equitable or fu                 | ıture inte   | rests in property (  | other than anything listed in line 1), and rights or powers exercisable f   | or your benefit   |
| ■ No                                    | -  |  | ,   | •   |
| ☐ Yes. Give specific in                 | formation  | about them   |   |   |
|   | Deposits of money  Examples: Checking, sinstitutions.  No  Yes | Deposits of money  Examples: Checking, savings, or institutions. If you hare of the position | Deposits of money  Examples: Checking, savings, or other financial accinstitutions. If you have multiple account  No  Yes | Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, an institutions. If you have multiple accounts with the same institution, list each.  No  Institution name:  17.1. Checking  Fireflighter Community Credit Union  17.2. Checking  Fireflighter Community Credit Union  17.3. Savings  Fireflighter Community Credit Union  17.3. Savings  Fireflighter Community Credit Union  Bonds, mutual funds, or publicly traded stocks  Examples: Bond funds, investment accounts with brokerage firms, money market accounts  No  Yes. Institution or issuer name:  Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LL joint venture  No  Yes. Give specific information about them.  Name of entity:  So downership:  Covernment and corporate bonds and other negotiable and non-negotiable instruments  Non-public instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  No  Yes. Give specific information about them  Issuer name:  Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans  No  Yes. List each account separately.  Type of account:  Pension  Ohio Police & Fire Pension Fund  Security deposits and prepayments  Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or other No  Yes.  Institution name or individual:  Annuties (A contract for a periodic payment of money to you, either for life or for a number of years)  No  Yes.  Institution name and description.  Separately file the records of any interests. 11 U.S.C. § 521(c):  Trusts, equitable or future interests in property (other than |

Official Form 106A/B Schedule A/B: Property page 4

| De  | ebtor 1            | Brian J. Janusek  |                                      | C                           | ase number <i>(if known)</i> |   |
|-----|--------------------|---|--------------------------------------|-----------------------------|------------------------------|---|
| 26. | Ехатр              | s, copyrights, trademarks, tradeles: Internet domain names, we  |                                      |                             | s                            |   |
|     | ■ No<br>□ Yes.     | Give specific information about   | them                                 |                             |                              |   |
|     | Examp<br>■ No      | es, franchises, and other general es: Building permits, exclusive   | licenses, cooperative associati      | on holdings, liquor license | es, professional licenses    |   |
|     | □ res.             | Give specific information about   | mem                                  |                             |                              |   |
| Me  | oney or p          | property owed to you?   |                                      |                             |                              | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|     | □ No               | unds owed to you  |                                      |                             |                              |   |
|     | ■ Yes. 0           | Give specific information about   | them, including whether you all      | eady filed the returns and  | the tax years                |   |
|     |                    |   |                                      |                             |                              |   |
|     |                    |   | 2018 return                          |                             | Federal                      | \$10,000.00   |
|     | Examp  ■ No        | support  oles: Past due or lump sum alim  Give specific information   | ony, spousal support, child sup      | port, maintenance, divorc   | e settlement, property se    | ettlement   |
|     | Examp  ■ No        | amounts someone owes you bles: Unpaid wages, disability in benefits; unpaid loans you Give specific information |                                      | nefits, sick pay, vacation  | pay, workers' compensa       | ation, Social Security  |
|     | Interest           | ts in insurance policies<br>bles: Health, disability, or life ins   | urance; health savings account       | (HSA); credit, homeowne     | er's, or renter's insurance  | ÷   |
|     | ■ No               |   |                                      |                             |                              |   |
|     | ☐ Yes. I           | Name the insurance company o<br>Company   |                                      | Beneficiary                 | r:                           | Surrender or refund value:  |
|     | If you a someon    | erest in property that is due yare the beneficiary of a living trune has died.  Give specific information       |                                      |                             | urrently entitled to receiv  | e property because  |
|     | Examp<br>□ No<br>□ | against third parties, whethe<br>les: Accidents, employment dis   |                                      |                             | or payment                   |   |
|     |                    |   |                                      |                             |                              |   |
|     |                    |   | Lawsuit versus MD Custo<br>Marc Dann | om is being investiga       | ted by Attorney              | Unknown   |
|     | ■ No               | contingent and unliquidated c   | laims of every nature, includi       | ng counterclaims of the     | edebtor and rights to s      | et off claims   |
| 35. | Any fin<br>■ No    | ancial assets you did not alre  | ady list                             |                             |                              |   |

19-50543-amk Doc 1 FILED 03/13/19 ENTERED 03/13/19 11:03:49 Page 14 of 55

page 5

Best Case Bankruptcy

Schedule A/B: Property

Official Form 106A/B

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| Debtor 1                 | Brian J. Janusek Case number  | r (if known)   |
|--------------------------|---|--|
| ☐ Ye                     | es. Give specific information   |  |
|                          | d the dollar value of all of your entries from Part 4, including any entries for pages you have at<br>Part 4. Write that number here                      |  |
| Part 5:                  | Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.  |  |
| ■ No.                    | ou own or have any legal or equitable interest in any business-related property?  Go to Part 6.  Go to line 38.   |  |
|                          | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. |  |
|                          | vou own or have any legal or equitable interest in any farm- or commercial fishing-related propo<br>No. Go to Part 7.                                     | erty?  |
| Y                        | Yes. Go to line 47.   |  |
|                          |   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| <i>Exal</i><br>□ No      | n animals amples: Livestock, poultry, farm-raised fish os   |  |
|                          | Animals: Goats, pigs, turkey, chickens, sheep, dogs held in LLC   | \$1,500.00   |
| 48. <b>Cro</b> p<br>■ No | os—either growing or harvested  |  |
| ☐ Ye                     | es. Give specific information   |  |
| 49. <b>Farm</b><br>□ No  | n and fishing equipment, implements, machinery, fixtures, and tools of trade  |  |
| ■ Ye                     | 9S  |  |
|                          | Saws, drills for barn maintenance held by LLC   | \$500.00   |
| 50. <b>Farm</b><br>■ No  | n and fishing supplies, chemicals, and feed   |  |
| ☐ Ye                     | es  |  |
| ■ No                     |   |  |
| ⊔ Ye                     | es. Give specific information   |  |
|                          | d the dollar value of all of your entries from Part 6, including any entries for pages you have at  | \$2 000 00 I   |
| Part 7:                  | Describe All Property You Own or Have an Interest in That You Did Not List Above  |  |

page 6

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Official Form 106A/B

Schedule A/B: Property

| Deb  | tor 1 Brian J. Janusek  |                 | Case number (if known)       |              |
|------|---|-----------------|------------------------------|--------------|
| _    | Do you have other property of any kind you did not already lis<br>Examples: Season tickets, country club membership  No | t?              |                              |              |
|      | Yes. Give specific information  |                 |                              |              |
| 54.  | Add the dollar value of all of your entries from Part 7. Write t  | hat number here |                              | \$0.00       |
| Part | 8: List the Totals of Each Part of this Form  |                 |                              |              |
| 55.  | Part 1: Total real estate, line 2   |                 |                              | \$560,000.00 |
| 56.  | Part 2: Total vehicles, line 5  | \$54,379.00     |                              |              |
| 57.  | Part 3: Total personal and household items, line 15   | \$20,000.00     |                              |              |
| 58.  | Part 4: Total financial assets, line 36   | \$103,661.39    |                              |              |
| 59.  | Part 5: Total business-related property, line 45  | \$0.00          |                              |              |
| 60.  | Part 6: Total farm- and fishing-related property, line 52   | \$2,000.00      |                              |              |
| 61.  | Part 7: Total other property not listed, line 54  | + \$0.00        |                              |              |
| 62.  | Total personal property. Add lines 56 through 61  | \$180,040.39    | Copy personal property total | \$180,040.39 |
| 63.  | Total of all property on Schedule A/B. Add line 55 + line 62  |                 |                              | \$740,040.39 |

Official Form 106A/B Schedule A/B: Property page 7

| Fill in this inform    | mation to identify your  | case:             |           |                                      |
|------------------------|--------------------------|-------------------|-----------|--------------------------------------|
| Debtor 1               | Brian J. Janusek         |                   |           |                                      |
|                        | First Name               | Middle Name       | Last Name |                                      |
| Debtor 2               |                          |                   |           |                                      |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name |                                      |
| United States Ba       | inkruptcy Court for the: | NORTHERN DISTRICT | OF OHIO   |                                      |
| Case number (if known) |                          |                   |           | ☐ Check if this is an amended filing |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the | Property | You | Claim | as | Exempt |
|---------|----------|-----|----------|-----|-------|----|--------|
|         |          |     |          |     |       |    |        |

| 1. | Which set of exemptions are | vou claiming? | Check one only. | even if your s | spouse is filing with | vou. |
|----|-----------------------------|---------------|-----------------|----------------|-----------------------|------|
|    |                             |               |                 |                |                       |      |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption        |
|--|--------------------------------------|-----|---|---|
|  | Copy the value from<br>Schedule A/B  | Che | eck only one box for each exemption.                            |   |
| 154 Substation Road Brunswick<br>Hills, OH 44212 Medina County                         | \$560,000.00                         |     | \$136,925.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(1)    |
| Residence: Single family Home Line from Schedule A/B: 1.1                              |                                      |     | 100% of fair market value, up to any applicable statutory limit | 2020.00(A)(1)                             |
| 2013 Ford F350 80000 miles<br>Good condition   | \$24,099.00                          |     | \$3,775.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(2)    |
| Line from Schedule A/B: 3.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |   |
| 2013 Mahindra 3016 370 hours miles<br>Good condition                                   | \$15,000.00                          |     | \$2,400.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(5)    |
| Line from Schedule A/B: 3.3  |                                      |     | 100% of fair market value, up to any applicable statutory limit |   |
| Household: Furniture Line from Schedule A/B: 6.1                                       | \$5,000.00                           | •   | \$5,000.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |
|  |                                      |     | 100% of fair market value, up to any applicable statutory limit | ( , , , ,                                 |
| Electronics: computer, video game, tvs   | \$3,000.00                           |     | \$3,000.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |
| Line from Schedule A/B: 7.1  |                                      |     | 100% of fair market value, up to any applicable statutory limit |   |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

| De  | btor 1 Br           | ian J. Janusek  |                                      |         | Case number (if known)  |   |
|-----|---------------------|---|--------------------------------------|---------|---|---|
|     |                     | ription of the property and line on A/B that lists this property  | Current value of the portion you own | Am      | ount of the exemption you claim                                 | Specific laws that allow exemption        |
| )eb |                     |   | Copy the value from<br>Schedule A/B  | Che     | eck only one box for each exemption.                            |   |
|     |                     | s: Guns<br>Schedule A/B: 10.1                                     | \$3,500.00                           |         | \$2,625.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |
|     |                     |   |                                      |         | 100% of fair market value, up to any applicable statutory limit | X X X                                     |
|     |                     | s: Guns<br>Schedule A/B: 10.1                                     | \$3,500.00                           |         | \$875.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(18)   |
|     | Line nom            | Schedule A/D. 10.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit | 2323.00(A)(10)                            |
|     |                     | : Clothes<br>Schedule A/B: 11.1                                   | \$3,500.00                           |         | \$2,000.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |
|     | Line nom            | Schedule A/D.   |                                      |         | 100% of fair market value, up to any applicable statutory limit | 2020.00(1)(4)(4)                          |
|     |                     | : Wedding rings<br>Schedule A/B: 12.1                             | \$5,000.00                           |         | \$1,600.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(b) |
|     | Line nom            | Scriedule A/B. 12.1   |                                      |         | 100% of fair market value, up to any applicable statutory limit | 2323.00(A)(4)(b)                          |
|     | Checkir<br>Credit L | ng: Firefighter Community   | \$1,465.00                           |         | \$475.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(3)    |
|     |                     | Schedule A/B: 17.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit | 2020.00(/1)(0)                            |
|     | Pensior<br>Fund     | n: Ohio Police & Fire Pension                                     | \$92,191.39                          |         | 100%  | Ohio Rev. Code Ann. § 742.47              |
|     |                     | Schedule A/B: 21.1  |                                      |         | 100% of fair market value, up to any applicable statutory limit |   |
| 3.  |                     | claiming a homestead exemption to adjustment on 4/01/19 and every |                                      |         | led on or after the date of adjustmer                           | nt.)                                      |
|     | ■ No                |   |                                      |         |   |   |
|     | ☐ Yes.              | . Did you acquire the property cover                              | ed by the exemption w                | ithin 1 | ,215 days before you filed this case                            | ?   |
|     |                     | No  |                                      |         |   |   |
|     |                     | Yes   |                                      |         |   |   |

| Fill to this information to identify an                                       |   |                         |                              |                                   |
|---|---|-------------------------|------------------------------|-----------------------------------|
| Fill in this information to identify you                                      | ur case:  |                         |                              |                                   |
| Debtor 1 Brian J. Januse First Name   | ·   | Name                    |                              |                                   |
| Debtor 2 (Spouse if, filing) First Name                                       | Middle Name Last  | Name                    |                              |                                   |
| United States Bankruptcy Court for the  | : NORTHERN DISTRICT OF OHIO   |                         |                              |                                   |
| Case number   |   |                         |                              |                                   |
| (if known)  |   |                         | _                            | k if this is an                   |
|   |   |                         | ame                          | nded filing                       |
| Official Form 106D  |   |                         |                              |                                   |
| Schedule D: Creditors   | s Who Have Claims Sec   | cured by Prop           | erty                         | 12/15                             |
|   | If two married people are filing together, boout, number the entries, and attach it to this   |                         |                              |                                   |
| Do any creditors have claims secured b  | y your property?  |                         |                              |                                   |
| ☐ No. Check this box and submit   | this form to the court with your other scheo  | dules. You have nothing | else to report on this form. |                                   |
| Yes. Fill in all of the information   | below.  |                         |                              |                                   |
| Part 1: List All Secured Claims   |   |                         |                              |                                   |
|   | more than one secured claim, list the creditor song a particular claim, list the other creditors in Palical order according to the creditor's name. |                         | the that supports this       | Column C Unsecured portion If any |
| 2.1 Farmers Ntl Bk Canfiel  | Describe the property that secures the cla  |                         |                              | \$0.00                            |
| Creditor's Name   | 2013 Mahindra 3016 370 hours m<br>Good condition  | illes                   |                              |                                   |
| 20 S Broad St<br>Canfield, OH 44406<br>Number, Street, City, State & Zip Code | As of the date you file, the claim is: Check a apply.  Contingent Unliquidated  | all that                |                              |                                   |
| Who owes the debt? Check one.   | ☐ Disputed  Nature of lien. Check all that apply.   |                         |                              |                                   |
| Debtor 1 only   | An agreement you made (such as mortga   | ge or secured           |                              |                                   |
| Debtor 2 only   | car loan)   | - E                     |                              |                                   |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another        | <ul><li>☐ Statutory lien (such as tax lien, mechanic'</li><li>☐ Judgment lien from a lawsuit</li></ul>  | s lien)                 |                              |                                   |
| ☐ Check if this claim relates to a community debt                             | Other (including a right to offset)   |                         |                              |                                   |
| Opened<br>04/14 Last<br>Active  |   |                         |                              |                                   |
| Date debt was incurred 1/07/19  | Last 4 digits of account number   | 0414                    |                              |                                   |
| Gateway One Lending & Finance   | Describe the property that secures the cla  | nim: \$17,025           | .00 \$15,280.00              | \$1,745.00                        |
| Creditor's Name  175 North Riverview  | 2013 Ford Explorer 80000 miles Good condition   |                         |                              |                                   |
| Drive   |   |                         |                              |                                   |
| Suite 100   | As of the date you file, the claim is: Check a apply.   | all that                |                              |                                   |
| Anaheim, CA 92808   | Contingent  |                         |                              |                                   |
| Number, Street, City, State & Zip Code  | ☐ Unliquidated☐ Disputed  |                         |                              |                                   |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.   |                         |                              |                                   |
| ■ Debtor 1 only □ Debtor 2 only   | ☐ An agreement you made (such as mortga car loan)   | ge or secured           |                              |                                   |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic  | s lien)                 |                              |                                   |
| ☐ At least one of the debtors and another                                     | ☐ Judgment lien from a lawsuit  |                         |                              |                                   |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

| Debtor 1 Brian J. Janusek  |  | Case number (if known)      |              |        |
|--|--|-----------------------------|--------------|--------|
| First Name Middle N  | Name Last Name   |                             |              |        |
| ☐ Check if this claim relates to a community debt  | ☐ Other (including a right to offset)  |                             |              |        |
| Opened 04/15 Last Active 2/07/19   | Last 4 digits of account number  | 1925                        |              |        |
| MD Custom Builders,  |  |                             |              |        |
| 2.3 LLC  | Describe the property that secures the cla   | im: \$9,670.88              | \$560,000.00 | \$0.00 |
| Creditor's Name  | 154 Substation Road Brunswick  |                             |              |        |
| c/o Stephen A. Eckinger<br>1611 North Main Street,<br>Suite A<br>North Canton, OH 44720  | Hills, OH 44212 Medina County Residence: Single family Home  As of the date you file, the claim is: Check a apply.  Contingent   | ill that                    |              |        |
| Number, Street, City, State & Zip Code   | Unliquidated   |                             |              |        |
| Who owes the debt? Check one.  | ■ Disputed  Nature of lien. Check all that apply.  |                             |              |        |
| ■ Debtor 1 only □ Debtor 2 only  | ☐ An agreement you made (such as mortga car loan)  | ge or secured               |              |        |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic   | s lien)                     |              |        |
| At least one of the debtors and another  | ☐ Judgment lien from a lawsuit   |                             |              |        |
| ☐ Check if this claim relates to a community debt  | Other (including a right to offset)  | hanic's lien                |              |        |
| community debt   |  |                             |              |        |
| Date debt was incurred   | Last 4 digits of account number  |                             |              |        |
| Date debt was incurred  2.4 Suntrust Bank  | Describe the property that secures the cla   | im: \$238,768.00            | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed  |                             | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.   | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  | all that                    | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only  | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed  | all that                    | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.   | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgacar loan)  | ge or secured               | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only  | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortga)  | ge or secured               | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only   | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortga car loan)  Statutory lien (such as tax lien, mechanic)  | ge or secured               | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a  | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortga car loan)  Statutory lien (such as tax lien, mechanic) Judgment lien from a lawsuit   | ge or secured               | \$560,000.00 | \$0.00 |
| Date debt was incurred  2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 01/14 Last Active | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortga car loan)  Statutory lien (such as tax lien, mechanic) Judgment lien from a lawsuit Other (including a right to offset)                                 | ge or secured s lien)       | \$560,000.00 | \$0.00 |
| 2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 01/14 Last Active Date debt was incurred               | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortga car loan)  Statutory lien (such as tax lien, mechanic) Judgment lien from a lawsuit Other (including a right to offset)                                 | ge or secured s lien)  5828 |              | \$0.00 |
| 2.4 Suntrust Bank Creditor's Name  Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286  Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt  Opened 01/14 Last Active Date debt was incurred               | Describe the property that secures the cla  154 Substation Road Brunswick Hills, OH 44212 Medina County Residence: Single family Home As of the date you file, the claim is: Check a apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortga car loan) Statutory lien (such as tax lien, mechanic) Judgment lien from a lawsuit Other (including a right to offset)  Last 4 digits of account number | ge or secured s lien)       | 88           | \$0.00 |

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

| Fill in this infor                      |                  |                   |           |                       |
|---|------------------|-------------------|-----------|-----------------------|
| Debtor 1                                | Brian J. Janusek |                   |           |                       |
|   | First Name       | Middle Name       | Last Name |                       |
| Debtor 2                                |                  |                   |           |                       |
| (Spouse if, filing)                     | First Name       | Middle Name       | Last Name |                       |
| United States Bankruptcy Court for the: |                  | NORTHERN DISTRICT | OF OHIO   |                       |
| Case number                             |                  |                   |           | ☐ Check if this is an |
| ,                                       |                  |                   |           | amended filing        |

### Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
  - No. Go to Part 2.
  - ☐ Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
  - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
  - ☐ Yes

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | Total Claim |
|-----------------------|-----|---|-----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$<br>0.00  |
| Total                 |     |   |     |             |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$<br>0.00  |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$<br>0.00  |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$<br>0.00  |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$<br>0.00  |
|                       | 6f. | Student loans   | 6f. | Total Claim |
| Total<br>claims       | OI. | Student loans   | OI. | \$<br>0.00  |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$<br>0.00  |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$<br>0.00  |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$<br>0.00  |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$<br>0.00  |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 1

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38864

| Fill in this info   | rmation to identify your | case:             |           |                           |
|---------------------|--------------------------|-------------------|-----------|---------------------------|
| Debtor 1            | Brian J. Janusek         |                   |           |                           |
|                     | First Name               | Middle Name       | Last Name |                           |
| Debtor 2            |                          |                   |           |                           |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name |                           |
| United States B     | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO   |                           |
| Case number         |                          |                   |           | <br>☐ Check if this is an |
| ,                   |                          |                   |           | <br>amended filing        |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   |   |
|     | City      |              | State   | ZIP Code          |   |
| 2.2 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.3 |           |              |   |                   |   |
| 0   | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   |   |
|     | City      |              | State   | ZIP Code          |   |
| 2.4 |           |              |   |                   |   |
|     | Name      |              |   |                   |   |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.5 |           | ·            |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | <del>_</del>                            |
|     |           |              |   |                   |   |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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| Fill in this                 | s information to identify you   | r case:                   |                          |  |
|------------------------------|---|---------------------------|--------------------------|--|
| Debtor 1                     | Brian J. Janusel  |                           |                          |  |
|                              | First Name  | Middle Name               | Last Name                |  |
| Debtor 2<br>(Spouse if, fill | ing) First Name   | Middle Name               | Last Name                |  |
| United Sta                   | ates Bankruptcy Court for the:  | NORTHERN DISTRIC          | T OF OHIO                |  |
| Case num<br>(if known)       | nber  |                           |                          | ☐ Check if this is an amended filing   |
| Officia                      | l Form 106H   |                           |                          |  |
|                              | dule H: Your Cod  | debtors                   |                          | 12/15  |
| your name                    | and number the entries in the and case number (if knowr you have any codebtors? (li                                     | n). Answer every questio  | n.                       | o this page. On the top of any Additional Pages, write   |
| ■ No                         |   |                           |                          |  |
| Arizor                       | thin the last 8 years, have yo<br>na, California, Idaho, Louisiana<br>. Go to line 3.<br>s. Did your spouse, former spo | a, Nevada, New Mexico, P  | uerto Rico, Texas, Washi | r? (Community property states and territories include ngton, and Wisconsin.)   |
| in line<br>Form              | e 2 again as a codebtor only  | if that person is a guara | ntor or cosigner. Make s | if your spouse is filing with you. List the person shown<br>ure you have listed the creditor on Schedule D (Official<br>GG). Use Schedule D, Schedule E/F, or Schedule G to fill |
|                              | Column 1: Your codebtor<br>Name, Number, Street, City, State and 2  | ZIP Code                  |                          | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  |
| 3.1                          | Name  |                           |                          | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line   |
|                              | Number Street<br>City   | State                     | ZIP Code                 | -  |
| 3.2                          | Name  |                           |                          | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line   |
| -                            | Number Street<br>City   | State                     | ZIP Code                 | -  |

| FIII        | in this information t                                      | to identify your ca                                   | ase:   |                           |                |      |       |                 |                   |              |                            |                    |
|-------------|--|---|--|---------------------------|----------------|------|-------|-----------------|-------------------|--------------|----------------------------|--------------------|
| Del         | btor 1   | Brian J. Jan  | usek   |                           |                |      |       |                 |                   |              |                            |                    |
|             | btor 2<br>buse, if filing)                                 |   |  |                           |                |      |       |                 |                   |              |                            |                    |
| Uni         | ited States Bankrup  | otcy Court for the                                    | : NORTHERN DISTRIC   | T OF OHIO                 |                |      |       |                 |                   |              |                            |                    |
| (If kı      | se number  | 4001  |  |                           |                |      |       |                 | amende<br>uppleme | nt showin    | g postpetit<br>ollowing da | ion chapter<br>te: |
|             | fficial Form   |   |  |                           |                |      |       | $\overline{MM}$ | / DD/ Y           | YYY          |                            |                    |
| S           | chedule I: `   | Your Inco   | ome  |                           |                |      |       |                 |                   |              |                            | 12/1               |
| spo<br>atta | use. If you are sep<br>ich a separate she<br>rt 1: Describ | parated and you<br>et to this form. (<br>e Employment | are married and not filir<br>r spouse is not filing wi<br>On the top of any additi | th you, do not i          | nclude info    | rma  | tion  | about yo        | our spo           | use. If mo   | ore space                  | is needed,         |
| 1.          | Fill in your emplinformation.                              | oyment  |  | Debtor 1                  |                |      |       | D               | ebtor 2           | or non-fi    | ling spous                 | se                 |
|             | If you have more   |   | Employment status  | ■ Employed                |                |      |       |                 | ☐ Emplo           | yed          |                            |                    |
|             | attach a separate information about                        |   | Employment status  | ☐ Not employed            |                |      |       | ■ Not employed  |                   |              |                            |                    |
|             | employers.   |   | Occupation   | Fire/Medic                |                |      |       |                 |                   |              |                            |                    |
|             | Include part-time,<br>self-employed wo                     |   | Employer's name  | City of Twin              | sburg          |      |       |                 |                   |              |                            |                    |
|             | Occupation may i<br>or homemaker, if                       |   | Employer's address   | 10069 Raver<br>Twinsburg, |                | ,    |       |                 |                   |              |                            |                    |
|             |  |   | How long employed t  | here? 19 `                | Years, 11      | Mor  | nths  | <b>S</b>        | _                 |              |                            |                    |
| Pai         | rt 2: Give De  | tails About Mor                                       | nthly Income   |                           |                |      |       |                 |                   |              |                            |                    |
|             | imate monthly incouse unless you are                       |   | ate you file this form. If   | you have nothing          | to report fo   | r an | y lin | e, write \$     | 0 in the          | space. Inc   | clude your                 | non-filing         |
|             | ou or your non-filing<br>re space, attach a se             |   | ore than one employer, co<br>this form.  | ombine the inform         | nation for all | em   | ploy  | ers for tha     | at perso          | n on the lii | nes below.                 | If you need        |
|             |  |   |  |                           |                |      | F     | For Debto       | or 1              |              | otor 2 or<br>ng spouse     | 9                  |
| 2.          |  |   | ry, and commissions (becalculate what the month)                                   |                           | . 2.           |      | \$_   | 6,60            | 67.31             | \$           | 0.0                        | 00                 |
| 3.          | Estimate and list  | t monthly overt                                       | ime pay.   |                           | 3.             | +    | \$_   |                 | 0.00              | +\$          | 0.0                        | 00                 |

6,667.31

Calculate gross Income. Add line 2 + line 3.

|     |                 |  |         |     | For     | Debtor 1 |      |         | Debtor<br>-filing s |               |                    |
|-----|-----------------|--|---------|-----|---------|----------|------|---------|---------------------|---------------|--------------------|
|     | Copy            | y line 4 here  | 4.      |     | \$_     | 6,667    | 7.31 | \$      | illing 0            | 0.00          | _                  |
| 5.  | List            | all payroll deductions:  |         |     |         |          |      |         |                     |               |                    |
|     | 5a.             | Tax, Medicare, and Social Security deductions  | 5a      | ١.  | \$      | 1,104    | 1.65 | \$      |                     | 0.00          | )                  |
|     | 5b.             | Mandatory contributions for retirement plans   | 5b      | ١.  | \$_     |          | 5.75 | \$_     |                     | 0.00          |                    |
|     | 5c.             | Voluntary contributions for retirement plans   | 5c      |     | \$_     |          | 0.00 | \$_     |                     | 0.00          |                    |
|     | 5d.             | Required repayments of retirement fund loans   | 5d      | ١.  | \$      | (        | 0.00 | \$      |                     | 0.00          |                    |
|     | 5e.             | Insurance  | 5e      | ٠.  | \$_     |          | 5.24 | \$_     |                     | 0.00          |                    |
|     | 5f.             | Domestic support obligations   | 5f.     |     | \$      | (        | 0.00 | \$_     |                     | 0.00          | <u> </u>           |
|     | 5g.             | Union dues   | 5g      | ١.  | \$      |          | 3.33 | \$      |                     | 0.00          |                    |
|     | 5h.             | Other deductions. Specify:   | 5h      |     | \$      |          |      | + \$    |                     | 0.00          |                    |
| 6.  | Add             | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.      |     | \$_     | 2,269    | 9.97 | \$      |                     | 0.00          | <u> </u>           |
| 7.  | Calc            | ulate total monthly take-home pay. Subtract line 6 from line 4.  | 7.      |     | \$      | 4,397    | 7.34 | \$      |                     | 0.00          | )                  |
| 8.  | List a          | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.      | 8a      |     | \$      |          | 0.00 | \$      |                     | 0.00          | _                  |
|     | 8b.             | Interest and dividends   | 8b      | ١.  | \$      | (        | 0.00 | \$      |                     | 0.00          | )                  |
|     | 8c.             | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | :<br>8c |     | \$      |          | 0.00 | \$      |                     | 918.00        | 1                  |
|     | 8d.             | Unemployment compensation  | 8d      |     | \$<br>- |          | 0.00 | \$-     |                     | 0.00          | _                  |
|     | 8e.             | Social Security  | 8e      |     | \$<br>- |          | 0.00 | \$<br>_ | - 1                 | 245.00        | _                  |
|     | 8f.             | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: VA disability |         |     | \$      | 1,609    |      | \$      | -,                  | 0.00          | _                  |
|     | 8g.             | Pension or retirement income   | <br>8g  | ١.  | \$      | (        | 0.00 | \$_     |                     | 0.00          |                    |
|     | 8h.             | Other monthly income. Specify:   | 8h      | .+  | \$_     | (        | 0.00 | + \$_   |                     | 0.00          | )                  |
| 9.  | Add             | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.      | 9   | \$      | 1,609    | 9.71 | \$_     | 2                   | 2,163.0       | 00                 |
| 10. |                 | ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.     | \$_ |         | 6,007.05 | + \$ | 2,      | 163.00              | = \$          | 8,170.05           |
| 11. | Inclu-<br>other | e all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your riends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not cify:             | depe    |     |         |          |      |         | Schedule<br>11.     |               | 0.00               |
| 12. |                 | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certal es   |         |     |         |          |      |         | 12.                 | \$            | 8,170.05           |
| 13. | Do y            | ou expect an increase or decrease within the year after you file this form   | 1?      |     |         |          |      |         |                     | Comb<br>month | ined<br>lly income |
|     |                 | No.  |         |     |         |          |      |         |                     |               |                    |
|     |                 | Yes. Explain:  |         |     |         |          |      |         |                     |               |                    |

Official Form 106I Schedule I: Your Income page 2

| Fill           | in this informa               | tion to identify yo                | our case:                |  |  |                  |                   |                               |       |
|----------------|-------------------------------|------------------------------------|--------------------------|--|--|------------------|-------------------|-------------------------------|-------|
| Deb            | tor 1                         | Brian J. Jan                       | usek                     |  |  | Chec             | k if this is:     |                               |       |
|                |                               | Brian C. Can                       | user                     |  |  |                  | An amended filing |                               |       |
| l              | tor 2                         |                                    |                          |  |  |                  |                   | ving postpetition chap        | oter  |
| (Spo           | ouse, if filing)              |                                    |                          |  |  |                  | 13 expenses as of | the following date:           |       |
| Unit           | ed States Bankr               | ruptcy Court for the               | : NORTH                  | HERN DISTRICT OF OHIO                                      | )  | =                | MM / DD / YYYY    |                               |       |
| !              | e number<br>nown)             |                                    |                          |  |  |                  |                   |                               |       |
| O <sub>1</sub> | fficial Fo                    | rm 106J                            |                          |  |  |                  |                   |                               |       |
|                |                               | J: Your                            | Fynar                    | 1606   |  |                  |                   |                               | 12/15 |
| Be<br>info     | as complete a                 | and accurate as                    | s possible<br>eded, atta | . If two married people a<br>ich another sheet to this     |  |                  |                   |                               |       |
| Par            |                               | ibe Your House                     | ehold                    |  |  |                  |                   |                               |       |
| 1.             | Is this a joir                |                                    |                          |  |  |                  |                   |                               |       |
|                | ■ No. Go to □ Yes. <b>Doe</b> |                                    | in a separ               | ate household?   |  |                  |                   |                               |       |
|                | □N                            | 0                                  | -                        |  |  |                  |                   |                               |       |
|                | □ Y                           | es. Debtor 2 mus                   | st file Offici           | al Form 106J-2, Expenses                                   | s for Separate House                     | hold of Debt     | tor 2.            |                               |       |
| 2.             | Do you have                   | e dependents?                      | Пль                      |  |  |                  |                   |                               |       |
| ۷.             | •                             | •                                  | ☐ No                     |  |  |                  |                   |                               |       |
|                | Do not list Do Debtor 2.      | ebtor 1 and                        | Yes.                     | Fill out this information for each dependent               | Dependent's relati<br>Debtor 1 or Debtor |                  | Dependent's age   | Does dependent live with you? |       |
|                | Do not state                  | the                                |                          |  |  |                  |                   | □ No                          |       |
|                | dependents                    | names.                             |                          |  | Stepson                                  |                  | 16                | Yes                           |       |
|                |                               |                                    |                          |  |  |                  |                   | □ No                          |       |
|                |                               |                                    |                          |  |  |                  |                   | ☐ Yes                         |       |
|                |                               |                                    |                          |  |  |                  |                   | □ No                          |       |
|                |                               |                                    |                          |  |  |                  |                   | ☐ Yes                         |       |
|                |                               |                                    |                          |  |  |                  |                   | □ No                          |       |
| 3.             | Do your exp                   | enses include                      |                          |  |  |                  |                   | ☐ Yes                         |       |
| 0.             | expenses of                   | f people other t<br>d your depende | han <sub>—</sub>         | No<br>Yes  |  |                  |                   |                               |       |
|                |                               | ate Your Ongoi                     |                          |  |  |                  |                   |                               |       |
| exp            |                               |                                    |                          | uptcy filing date unless y<br>y is filed. If this is a sup |  |                  |                   |                               |       |
| Inc            | lude expense                  | s paid for with                    | non-cash                 | government assistance                                      | if you know                              |                  |                   |                               |       |
|                |                               |                                    | d have inc               | cluded it on Schedule I:                                   | Your Income                              |                  | Your expe         | onege                         |       |
| (Ot            | ficial Form 10                | )6I.)                              |                          |  |  |                  | Tour expe         | enses                         |       |
| 4.             |                               | or home owners                     |                          | ses for your residence.                                    | Include first mortgage                   | e<br>4. \$       |                   | 0.00                          |       |
|                | If not includ                 | led in line 4:                     | -                        |  |  |                  |                   |                               |       |
|                | 4a Pool o                     | estate taxes                       |                          |  |  | 40 °C            |                   | 0.00                          |       |
|                |                               | estate taxes<br>rty, homeowner's   | s or renter              | 's insurance   |  | 4a. \$<br>4b. \$ |                   | 0.00<br>0.00                  |       |
|                |                               | •                                  |                          | upkeep expenses  |  | 4c. \$           |                   | 100.00                        |       |
|                |                               | owner's associa                    |                          |  |  | 4d. \$           |                   | 0.00                          |       |
| 5.             | Additional r                  | nortgage paym                      | ents for yo              | our residence, such as ho                                  | ome equity loans                         | 5. \$            |                   | 0.00                          |       |

| ill in this infor   | mation to identify your  | <del></del>   |  |  |
|---|--|---|--|--|
| Debtor 1  | Brian J. Janusek   |   |  |  |
| ) - l. ( 0  | First Name   | Middle Name   | Last Name  |  |
| Debtor 2<br>Spouse if, filing)  | First Name   | Middle Name   | Last Name  |  |
| Jnited States Ba  | ankruptcy Court for the:   | NORTHERN DISTRICT   | OF OHIO  |  |
| Case number   |  |   |  |  |
| if known)   |  |   |  | ☐ Check if this is an amended filing   |
| Official Ford  Declarate  |  | an Individual   | Debtor's Schedul   | <b>es</b> 12/15  |
| ou must file th<br>btaining mone  | is form whenever you fi<br>y or property by fraud ii   | ile bankruptcy schedules<br>n connection with a bank                    |  | ation.<br>alse statement, concealing property, or<br>o \$250,000, or imprisonment for up to 20   |
| ou must file th<br>btaining mone<br>ears, or both. 1  | is form whenever you fi  | ile bankruptcy schedules<br>n connection with a bank                    | or amended schedules. Making a f   | alse statement, concealing property, or  |
| ou must file the ptaining mone ears, or both. 1   | is form whenever you fi<br>y or property by fraud ii<br>18 U.S.C. §§ 152, 1341, 1  | ile bankruptcy schedules<br>n connection with a bank<br> 519, and 3571. | or amended schedules. Making a f   | alse statement, concealing property, or o \$250,000, or imprisonment for up to 20  |
| ou must file the btaining mone ears, or both. 1   | is form whenever you fi<br>y or property by fraud ii<br>18 U.S.C. §§ 152, 1341, 1  | ile bankruptcy schedules<br>n connection with a bank<br> 519, and 3571. | or amended schedules. Making a f<br>ruptcy case can result in fines up to  | alse statement, concealing property, or o \$250,000, or imprisonment for up to 20  |
| ou must file the btaining mone ears, or both. 1  Sig  Did you pa  | is form whenever you fi<br>y or property by fraud ii<br>18 U.S.C. §§ 152, 1341, 1  | ile bankruptcy schedules<br>n connection with a bank<br> 519, and 3571. | or amended schedules. Making a fruptcy case can result in fines up to help you fill out bankruptcy f   | alse statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms?   |
| Did you pa  | is form whenever you fi y or property by fraud it 18 U.S.C. §§ 152, 1341, 1 In Below  ay or agree to pay some  Name of person  | ile bankruptcy schedules<br>n connection with a bank<br>1519, and 3571. | or amended schedules. Making a fruptcy case can result in fines up to help you fill out bankruptcy f   | alse statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms?  Stach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |
| Did you pa  No Yes.  Under penathat they ar   | is form whenever you fi y or property by fraud ii 18 U.S.C. §§ 152, 1341, 1 In Below  ay or agree to pay some  Name of person  alty of perjury, I declare                      | ile bankruptcy schedules<br>n connection with a bank<br>1519, and 3571. | or amended schedules. Making a fruptcy case can result in fines up to help you fill out bankruptcy for the proof of the pr | alse statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms?  Stach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |
| ou must file the btaining mone ears, or both. 1  Sig  Did you pa  No  Yes.  Under penathat they are that they are Brian | is form whenever you fi y or property by fraud ii 18 U.S.C. §§ 152, 1341, 1 In Below  ay or agree to pay some  Name of person  alty of perjury, I declare re true and correct. | ile bankruptcy schedules<br>n connection with a bank<br>1519, and 3571. | or amended schedules. Making a fruptcy case can result in fines up to help you fill out bankruptcy f   | alse statement, concealing property, or o \$250,000, or imprisonment for up to 20 forms?  Stach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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| Fill in          | this inforn           | nation to identify you                       | r case:   |   |   |   |
|------------------|-----------------------|--|---|---|---|---|
| Debto            | or 1                  | Brian J. Janusel                             | Middle Name   | Last Name   |   |   |
| Debto<br>(Spouse | or 2<br>e if, filing) | First Name                                   | Middle Name   | Last Name   |   |   |
| United           | d States Bai          | nkruptcy Court for the:                      | NORTHERN DISTRICT (   | OF OHIO   |   |   |
| Case<br>(if know | number _              |  |   |   | _   | Check if this is an imended filing                    |
| Stat             | ement                 | and accurate as poss                         |   | are filing together, both are                         | equally responsible for sup                                     |   |
|                  |                       | ore space is needed,<br>n). Answer every que |   | this form. On the top of an                           | y additional pages, write you                                   | ır name and case                                      |
| Part 1           | Give D                | etails About Your Ma                         | arital Status and Where You   | Lived Before  |   |   |
| 1. W             | /hat is you           | r current marital statu                      | ıs?   |   |   |   |
|                  | Married Not mar       | ried   |   |   |   |   |
| 2. D             | uring the la          | ast 3 years, have you                        | lived anywhere other than   | where you live now?                                   |   |   |
| <b>=</b>         | ■ No<br>■ Yes. Lis    | t all of the places you l                    | ived in the last 3 years. Do no   | ot include where you live nov                         | ı.  |   |
| C                | Debtor 1 Pr           | ior Address:                                 | Dates Debtor 1 lived there  | Debtor 2 Prior Ac                                     | ldress:   | Dates Debtor 2<br>lived there                         |
|                  |                       |  |   |   | ity property state or territory<br>ico, Texas, Washington and W |   |
| •                | ■ No<br>■ Yes. Ma     | ike sure you fill out Scl                    | hedule H: Your Codebtors (O   | fficial Form 106H).                                   |   |   |
| Part 2           | Explai                | n the Sources of You                         | r Income  |   |   |   |
| Fi               | ill in the tota       | al amount of income yo                       | nployment or from operatin<br>u received from all jobs and a<br>have income that you receiv | all businesses, including part                        |   | ndar years?   |
|                  | No<br>■ Yes. Fill     | in the details.                              |   |   |   |   |
|                  |                       |  | Debtor 1  |   | Debtor 2  |   |
|                  |                       |  | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                      | Gross income<br>(before deductions<br>and exclusions) |
|                  | •                     | of current year until<br>d for bankruptcy:   | ■ Wages, commissions, bonuses, tips   | \$9,274.07  | ☐ Wages, commissions, bonuses, tips                             |   |
|                  |                       |  | ☐ Operating a business  |   | ☐ Operating a business  |   |

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

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| For last calendar year:<br>(January 1 to December 31, 2018)  |   | \$0.00<br>\$0.00   | Social Security  Child support from former spouse | \$2,490.00<br>\$10,800.00                             |  |
|--|---|--|---|---|--|
| the date you filed for bankrupicy.   |   | \$0.00   | Social Security                                   | \$2,490.0   |  |
| the date you filed for bankruptcy.   |   |  |   |   |  |
| From January 1 of current year until the date you filed for bankruptcy:  |   | \$0.00   | Child support from<br>former spouse               | \$1,836.0   |  |
|  | Debtor 1<br>Sources of income<br>Describe below.                  | Gross income from each source (before deductions and exclusions)   | Debtor 2<br>Sources of income<br>Describe below.  | Gross income<br>(before deductions<br>and exclusions) |  |
| <ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>   |   |  |   |   |  |
| List each source and the gross inco  | ome from each source separat                                      | tely. Do not include income the                                    | nat you listed in line 4.                         |   |  |
| Did you receive any other incom-<br>Include income regardless of wheth<br>and other public benefit payments;<br>winnings. If you are filing a joint case | her that income is taxable. Exa<br>pensions; rental income; inter | amples of <i>other income</i> are a rest; dividends; money collect | ted from lawsuits; royalties; an                  |   |  |
|  | ☐ Operating a business  |  | ☐ Operating a business                            |   |  |
| For the calendar year before that:<br>(January 1 to December 31, 2017)   | ■ Wages, commissions, bonuses, tips                               | \$72,229.00  | ☐ Wages, commissions, bonuses, tips               |   |  |
|  | ☐ Operating a business  |  | ☐ Operating a business                            |   |  |
| For last calendar year:<br>(January 1 to December 31, 2018 )   | ■ Wages, commissions, bonuses, tips                               | \$84,998.58  | ☐ Wages, commissions, bonuses, tips               |   |  |
|  | Sources of income<br>Check all that apply.                        | Gross income<br>(before deductions and<br>exclusions)              | Sources of income<br>Check all that apply.        | Gross income<br>(before deduction<br>and exclusions)  |  |
|  | Debtor 1  |  | Debtor 2  |   |  |

Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

 $\square$  No. Go to line 7.

□ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No. Go to line 7.

> List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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Debtor 1

Brian J. Janusek

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| 12.  | Within 1 year before you filed for bankru court-appointed receiver, a custodian, or  |          | as any of your property in the possession of an a  | assignee for the ben              | efit of creditors, a      |  |  |
|--|--|----------|--|-----------------------------------|---------------------------|--|--|
|  | ■ No   |          |  |                                   |                           |  |  |
|  | □ Yes  |          |  |                                   |                           |  |  |
| Par  | t 5: List Certain Gifts and Contribution   | s        |  |                                   |                           |  |  |
| 13   | Within 2 years before you filed for bankr  | untev. d | did you give any gifts with a total value of more t  | han \$600 ner nerson              | ?                         |  |  |
| 10.  | ■ No   | артоу, с | ara you give any give man a total value of more a  | nan vooc per percen               |                           |  |  |
|  | ☐ Yes. Fill in the details for each gift.  |          |  |                                   |                           |  |  |
|  | Gifts with a total value of more than \$60 per person  | 0        | Describe the gifts   | Dates you gave the gifts          | Value                     |  |  |
|  | Person to Whom You Gave the Gift and Address:  |          |  |                                   |                           |  |  |
| 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$60 |  |          |  |                                   |                           |  |  |
|  | $\square$ Yes. Fill in the details for each gift or c  | ontribut | ion.   |                                   |                           |  |  |
|  | Gifts or contributions to charities that t<br>more than \$600<br>Charity's Name  | otal     | Describe what you contributed  | Dates you contributed             | Value                     |  |  |
|  | Address (Number, Street, City, State and ZIP Code  | e)       |  |                                   |                           |  |  |
| Par  | t 6: List Certain Losses   |          |  |                                   |                           |  |  |
| 15.  | Within 1 year before you filed for bankru or gambling?   | ptcy or  | since you filed for bankruptcy, did you lose any   | thing because of the              | ft, fire, other disaster, |  |  |
|  | No   |          |  |                                   |                           |  |  |
|  | Yes. Fill in the details.  |          |  |                                   |                           |  |  |
|  | Describe the property you lost and how the loss occurred   | Include  | ibe any insurance coverage for the loss the amount that insurance has paid. List pending   | Date of your loss                 | Value of property lost    |  |  |
|  |  | insurar  | nce claims on line 33 of Schedule A/B: Property.   |                                   |                           |  |  |
| Par  | t7: List Certain Payments or Transfers   | \$       |  |                                   |                           |  |  |
| 16.  | consulted about seeking bankruptcy or p  | preparii | id you or anyone else acting on your behalf pay on going a bankruptcy petition? s, or credit counseling agencies for services required |                                   | erty to anyone you        |  |  |
|  | ■ No   |          |  |                                   |                           |  |  |
|  | Yes. Fill in the details.  |          |  |                                   |                           |  |  |
|  | Person Who Was Paid<br>Address<br>Email or website address   |          | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment         |  |  |
|  | Person Who Made the Payment, if Not Y  | 'ou      |  | made                              |                           |  |  |
| 17.  | Within 1 year before you filed for bankru<br>promised to help you deal with your cred<br>Do not include any payment or transfer that | litors o |  | or transfer any prope             | erty to anyone who        |  |  |
|  | ■ No   |          |  |                                   |                           |  |  |
|  | Yes. Fill in the details.  |          |  |                                   |                           |  |  |
|  | Person Who Was Paid<br>Address   |          | Description and value of any property transferred  | Date payment or transfer was made | Amount of payment         |  |  |
|  |  |          |  | mauc                              |                           |  |  |

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Debtor 1 Brian J. Janusek

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| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. |   |                                |                |  |   |  |
|-----|---|---|--------------------------------|----------------|--|---|--|
|     | _   |   |                                |                |  |   |  |
|     | Yes. Fill in the details.   |   |                                |                |  |   |  |
|     | Person Who Received Transfer<br>Address   | Description and property transfer                                 |                                | payment        | e any property or<br>ts received or debts<br>exchange      | Date transfer was made                        |  |
|     | Person's relationship to you  |   |                                | ·              |  |   |  |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No   |   |                                |                |  |   |  |
|     | Yes. Fill in the details.   |   |                                |                |  |   |  |
|     | Name of trust   | Description and   | value of the pro               | nerty transfe  | rrad   | Date Transfer was                             |  |
|     | Nume of trust   | Description and   | raide of the pro               | perty transfer | 1100   | made  |  |
| Par | t 8: List of Certain Financial Accounts, Inst   | ruments, Safe Deposi  | t Boxes, and St                | orage Units    |  |   |  |
| 20  | Within 1 year before you filed for bankruptcy.  | . were any financial ac   | counts or instr                | uments held    | in your name, or for yo                                    | ur benefit. closed.                           |  |
| 20. | sold, moved, or transferred?<br>Include checking, savings, money market, or   | other financial accou   | nts; certificates              | of deposit; s  |  | ,   |  |
|     | houses, pension funds, cooperatives, associ   | ations, and other fina  | ncial institution              | s.             |  |   |  |
|     | No  |   |                                |                |  |   |  |
|     | Yes. Fill in the details.   |   |                                |                |  |   |  |
|     |   | Last 4 digits of account number                                   | Type of account instrument     | c<br>m         | ate account was<br>losed, sold,<br>noved, or<br>ransferred | Last balance<br>before closing or<br>transfer |  |
| 21. | Do you now have, or did you have within 1 yearsh, or other valuables?   | ear before you filed fo   | r bankruptcy, aı               | ny safe depos  | sit box or other deposit                                   | ory for securities,                           |  |
|     | ■ No □ Yes. Fill in the details.  |   |                                |                |  |   |  |
|     | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   |   | Address (Number, Street, City, |                | e contents   | Do you still have it?                         |  |
| 22. | ave you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  |   |                                |                |  |   |  |
|     | ■ No □ Yes. Fill in the details.  |   |                                |                |  |   |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)  | Who else has or<br>to it?<br>Address (Number, State and ZIP Code) |                                | Describe the   | e contents   | Do you still have it?                         |  |
| Par | t 9: Identify Property You Hold or Control for  | or Someone Else   |                                |                |  |   |  |
| 23. | Do you hold or control any property that som for someone.   | neone else owns? Incl   | ude any proper                 | ty you borrov  | ved from, are storing fo                                   | or, or hold in trust                          |  |
|     | ■ No  |   |                                |                |  |   |  |
|     | Yes. Fill in the details.   |   |                                |                |  |   |  |
|     |   |   |                                |                |  |   |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | (Number, Street, City, S<br>Code)                                 |                                | Describe the   | e property   | Value   |  |
| Par | t 10: Give Details About Environmental Infor  | rmation   |                                |                |  |   |  |
| For | the purpose of Part 10, the following definition  | ns apply:   |                                |                |  |   |  |
|     | Environmental law means any federal, state,   | or local statute or reg   | ulation concern                | ing pollution  | , contamination, releas                                    | es of hazardous or                            |  |

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Debtor 1 Brian J. Janusek Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

|  | nazardous material, polititant, contaminant, or similar term.  |   |                     |   |                    |  |
|--|--|---|---------------------|---|--------------------|--|
| Report all notices, releases, and proceedings that you know about, regardless of when they occurred. |  |   |                     |   |                    |  |
| 24.  | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? |   |                     |   |                    |  |
|  | ■ No □ Yes Fill in the details   |   |                     |   |                    |  |
|  |  |   |                     |   |                    |  |
|  | Name of site Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environment know it | ntal law, if you  | Date of notice     |  |
| 25.  | Have you notified any governmental unit of any release of hazardous material?  |   |                     |   |                    |  |
|  | ■ No □ Yes. Fill in the details.   |   |                     |   |                    |  |
|  | Name of site<br>Address (Number, Street, City, State and ZIP Code)   | Governmental unit Address (Number, Street, City, State and ZIP Code)    | Environment know it | ntal law, if you  | Date of notice     |  |
| 26.  | Have you been a party in any judicial or add   | ministrative proceeding under any enviro                                | onmental law?       | Include settlements a   | and orders.        |  |
|  | ■ No □ Yes. Fill in the details.   |   |                     |   |                    |  |
|  | Case Title Case Number   | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the c     | ase   | Status of the case |  |
| Par  | t11: Give Details About Your Business or   | Connections to Any Business   |                     |   |                    |  |
| 27.  | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   |   |                     |   |                    |  |
|  | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time                      |   |                     |   |                    |  |
|  | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)   |   |                     |   |                    |  |
|  | ☐ A partner in a partnership   |   |                     |   |                    |  |
|  | ☐ An officer, director, or managing executive of a corporation   |   |                     |   |                    |  |
|  | ☐ An owner of at least 5% of the voting or equity securities of a corporation  |   |                     |   |                    |  |
|  | No. None of the above applies. Go to Part 12.  |   |                     |   |                    |  |
|  | Yes. Check all that apply above and fill in the details below for each business.   |   |                     |   |                    |  |
|  | Business Name Address (Number, Street, City, State and ZIP Code)   | Describe the nature of the business  Name of accountant or bookkeeper   |                     | Employer Identification number Do not include Social Security number or ITIN. |                    |  |
|  | (,, <b>,</b> , <b>,</b> ,  | Name of accountant of bookkeeper  | Dates bus           | Dates business existed  |                    |  |
|  | K & B Ranch LLC<br>154 Substation Rd   | Agriculture   | EIN:                | 47-1465232  |                    |  |
|  | Brunswick, OH 44212-1031   | Mike Kelley 2166617120  | From-To             | 05/09/2014  |                    |  |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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|   | Case number (if known)   |
|---|--|
| institutions, creditors, or other parties.  | ptcy, did you give a financial statement to anyone about your business? Include all financial  |
| Yes. Fill in the details below.  Name Address (Number, Street, City, State and ZIP Code)  | Date Issued  |
| Part 12: Sign Below   |  |
|   | inancial Affairs and any attachments, and I declare under penalty of perjury that the answers  |
| are true and correct. I understand that making  | a false statement, concealing property, or obtaining money or property by fraud in connection o \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 2 |
| are true and correct. I understand that making with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Brian J. Janusek   | a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both.                          |
| are true and correct. I understand that making with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Brian J. Janusek Brian J. Janusek  | a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both.                          |
| are true and correct. I understand that making with a bankruptcy case can result in fines up to 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Brian J. Janusek Brian J. Janusek Signature of Debtor 1  Date March 12, 2019 | a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both.  Signature of Debtor 2   |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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| Fill in this information to identify your case: |  |  |  |
|---|--|--|--|
| Debtor 1  | Brian J. Janusek                                   |  |  |
| Debtor 2<br>(Spouse, if filing)                 |  |  |  |
| United States B                                 | ankruptcy Court for the: Northern District of Ohio |  |  |
| Case number (if known)                          |  |  |  |

| Check as directed in lines 17 and 21: |  |  |  |  |
|---------------------------------------|--|--|--|--|
| 1                                     | according to the calculations required by this statement:            |  |  |  |
|                                       | 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). |  |  |  |
| •                                     | 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).     |  |  |  |
|                                       | 3. The commitment period is 3 years.                                 |  |  |  |
|                                       | 4. The commitment period is 5 years.                                 |  |  |  |

☐ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B, lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 6,581.98 0.00 payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 918.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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|      |  |   |           | Column A Debtor 1 |              | Column B Debtor 2 o |             |                              |
|------|--|---|-----------|-------------------|--------------|---------------------|-------------|------------------------------|
| 7.   | Interest, dividends, and royalties   |   |           | \$                | 0.00         | \$                  | 0.00        |                              |
| 8.   | Unemployment compensation  |   |           | \$                | 0.00         | \$                  | 0.00        |                              |
|      | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:   | int received was a benefi                         | t under   |                   |              |                     |             |                              |
|      | For you  | \$0.0   | 00        |                   |              |                     |             |                              |
|      | For your spouse  | \$  | 00        |                   |              |                     |             |                              |
| 9.   | <b>Pension or retirement income.</b> Do not include any a benefit under the Social Security Act.   | amount received that was                          | s a       | \$                | 0.00         | \$                  | 0.00        |                              |
| 10.  | Income from all other sources not listed above. Sp<br>Do not include any benefits received under the Social<br>received as a victim of a war crime, a crime against h<br>domestic terrorism. If necessary, list other sources on<br>total below. | Security Act or payment umanity, or international | ts<br>or  | 2                 |              |                     |             |                              |
|      |  |   | _         | \$                | 0.00         | \$                  | 0.00        |                              |
|      | <del></del>  |   |           | \$                | 0.00         | \$                  | 0.00        |                              |
|      | Total amounts from separate pages, if any.   |   | +         | \$                | 0.00         | \$                  | 0.00        |                              |
| 11.  | Calculate your total average monthly income. Add each column. Then add the total for Column A to the   |   | \$        | 6,581.98          | + \$ _       | 918.00              | = \$        | 7,499.98                     |
| Part | 2: Determine How to Measure Your Deduction   | s from Income                                     |           |                   |              |                     |             | tal average<br>onthly income |
| 12.  | Copy your total average monthly income from line   | e 11  |           |                   |              |                     | \$          | 7,499.98                     |
| 13.  | Calculate the marital adjustment. Check one:   |   |           |                   |              |                     |             |                              |
|      | You are not married. Fill in 0 below.  | Ellis Obstan                                      |           |                   |              |                     |             |                              |
|      | You are married and your spouse is filing with you   |   |           |                   |              |                     |             |                              |
|      | You are married and your spouse is not filing wit  | •   | Гl.       |                   | h =  h = = = |                     |             |                              |
|      | Fill in the amount of the income listed in line 11, dependents, such as payment of the spouse's ta   | x liability or the spouse's                       | suppo     | rt of someon      | e other th   | an you or you       | ır depend   | ents.                        |
|      | Below, specify the basis for excluding this incom adjustments on a separate page.  | e and the amount of inco                          | ome de    | voted to each     | n purpose    | . If necessary      | , list addi | tional                       |
|      | If this adjustment does not apply, enter 0 below.  |   | \$        |                   |              |                     |             |                              |
|      |  |   | - Φ<br>\$ |                   | _            |                     |             |                              |
|      |  |   | +\$       |                   |              |                     |             |                              |
|      |  |   |           | 0.0               | _            |                     |             | 0.00                         |
|      | Total  |   | \$        | 0.0               | Co           | py here=>           |             | 0.00                         |
| 14.  | Your current monthly income. Subtract line 13 fro  | om line 12.                                       |           |                   |              |                     | \$          | 7,499.98                     |
| 15.  |  | ear. Follow these steps:                          |           |                   |              |                     |             | 7 400 00                     |
|      | 15a. Copy line 14 here=>   |   |           |                   |              |                     | \$          | 7,499.98                     |
|      | Multiply line 15a by 12 (the number of months  | in a year).                                       |           |                   |              |                     | X           | 12                           |
|      | 15b. The result is your current monthly income for t   | the year for this part of th                      | e form    |                   |              |                     | \$          | 89,999.76                    |
|      |  |   |           |                   |              |                     |             |                              |

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

| Debtor 1       | Briar                  | n J. Janusek   |  | Case number (if known)                |                 |                 |
|----------------|------------------------|--|--|---------------------------------------|-----------------|-----------------|
| 16. <b>C</b> a | alculate               | the median family income that applies to y   | ou. Follow these steps:                              |                                       |                 |                 |
| 16             | a. Fill in             | the state in which you live.   | ОН   |                                       |                 |                 |
| 16             | b. Fill in             | the number of people in your household.  | 3  |                                       |                 |                 |
| 16             | c. Fill in             | the median family income for your state and s  | ize of household.                                    |                                       | \$              | 73,182.00       |
|                |                        | d a list of applicable median income amounts ctions for this form. This list may also be avail   | , go online using the link                           | specified in the separate             | · -             |                 |
| 17. <b>H</b> o | _                      | e lines compare?   |  |                                       |                 |                 |
| 17             | 'a. □                  | Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do No   |  |                                       |                 |                 |
| 17             | 'b. ■                  | Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcu</b> your current monthly income from line 14 ab   | lation of Your Disposa                               |                                       |                 |                 |
| Part 3:        | Cal                    | culate Your Commitment Period Under 11 t   | J.S.C. § 1325(b)(4)                                  |                                       |                 |                 |
| 18. <b>C</b> c | opy your               | total average monthly income from line 11  | l  |                                       | \$              | 7,499.98        |
| co<br>sp       | ntend the<br>ouse's in | e marital adjustment if it applies. If you are at calculating the commitment period under 11 acome, copy the amount from line 13.  marital adjustment does not apply, fill in 0 on l | married, your spouse is<br>I U.S.C. § 1325(b)(4) all | not filing with you, and you          | -<br>-\$        | 0.00            |
|                |                        |  |  |                                       |                 |                 |
| 19             | b. Subtr               | act line 19a from line 18.   |  |                                       | \$              | 7,499.98        |
| 20. <b>C</b> a | alculate               | your current monthly income for the year.  | Follow these steps:                                  |                                       |                 |                 |
| 20             | a. Copy                | line 19b   |  |                                       | \$_             | 7,499.98        |
|                | Multip                 | ly by 12 (the number of months in a year).   |  |                                       |                 | <b>x</b> 12     |
| 20             | b. The re              | esult is your current monthly income for the ye  | ear for this part of the for                         | rm                                    | \$_             | 89,999.76       |
| 20             | с. Сору                | the median family income for your state and s  | size of household from li                            | ine 16c                               | \$_             | 73,182.00       |
| 21             | . How                  | do the lines compare?  |  |                                       |                 |                 |
|                |                        | Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.   | e ordered by the court,                              | on the top of page 1 of this form, of | check box 3,    | The commitment  |
|                |                        | Line 20b is more than or equal to line 20c. Unlocommitment period is 5 years. Go to Part 4.  | ess otherwise ordered b                              | by the court, on the top of page 1 c  | of this form, o | heck box 4, The |
| Part 4:        | Sig                    | n Below  |  |                                       |                 |                 |
| Ву             | signing                | here, under penalty of perjury I declare that the  | ne information on this st                            | atement and in any attachments is     | true and co     | rect.           |
| x /            | s/ Brian               | ı J. Janusek   |  |                                       |                 |                 |
|                |                        | <b>Janusek</b> of Debtor 1   |  |                                       |                 |                 |
| Da             |                        | ch 12, 2019  |  |                                       |                 |                 |
| lf v           |                        | / DD / YYYY<br>ked 17a, do NOT fill out or file Form 122C-2.   |  |                                       |                 |                 |

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

| Fill in this information to identify your case:  |   |
|--|---|
| Debtor 1 Brian J. Janusek  |   |
| Debtor 2 (Spouse, if filing)   |   |
| United States Bankruptcy Court for the: Northern District of Ohio  |   |
| Case number(if known)  | ☐ Check if this is an amended filing                                  |
| Official Form 122C-2 Chapter 13 Calculation of Your Disposab   | le Income 04/16   |
| To fill out this form, you will need your completed copy of <i>Chapter 13 St Commitment Period</i> (Official Form 122C-1).   | atement of Your Current Monthly Income and Calculation of             |
| Be as complete and accurate as possible. If two married people are filing space is needed, attach a separate sheet to this form, include the line not additional pages, write your name and case number (if known).            |   |
| Part 1: Calculate Your Deductions from Your Income   |   |
| The Internal Revenue Service (IRS) issues National and Local Standa the questions in lines 6-15. To find the IRS standards, go online using information may also be available at the bankruptcy clerk's office.                |   |
| Deduct the expense amounts set out in lines 6-15 regardless of your actual expenses if they are higher than the standards. Do not include any operating 122C-1, and do not deduct any amounts that you subtracted from your sp | ing expenses that you subtracted from income in lines 5 and 6 of Form |
| If your expenses differ from month to month, enter the average expense.  |   |
| Note: Line numbers 1-4 are not used in this form. These numbers apply to   | information required by a similar form used in chapter 7 cases.       |
| 5. The number of people used in determining your deductions from   | n income  |
| Fill in the number of people who could be claimed as exemptions on plus the number of any additional dependents whom you support. Th the number of people in your household.   |   |
| National Standards You must use the IRS National Standards t   | o answer the questions in lines 6-7.                                  |
| Food, clothing, and other items: Using the number of people you estandards, fill in the dollar amount for food, clothing, and other items.   |   |

**Chapter 13 Calculation of Your Disposable Income** 

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are

higher than this IRS amount, you may deduct the additional amount on line 22.

| eople v                                 | who are under 65 years of age  |  |   |   |                           |               |                                |
|---|--|--|---|---|---------------------------|---------------|--------------------------------|
| 7a.                                     | Out-of-pocket health care allowance per person   | \$   | 52  |   |                           |               |                                |
| 7b.                                     | Number of people who are under 65  | Χ  | 3   |   |                           |               |                                |
| 7c.                                     | Subtotal. Multiply line 7a by line 7b.   | \$1  | 56.00   | Copy here=>   | · \$                      | 156.00        |                                |
| eople v                                 | who are 65 years of age or older   |  |   |   |                           |               |                                |
| 7d.                                     | Out-of-pocket health care allowance per person   | \$   | 114   |   |                           |               |                                |
| 7e.                                     | Number of people who are 65 or older   | χ  | 0   |   |                           |               |                                |
| 7f.                                     | Subtotal. Multiply line 7d by line 7e.   | \$   | 0.00  | Copy here=>   | · \$                      | 0.00          |                                |
| 7g.                                     | Total. Add line 7c and line 7f   |  | \$  | 156.00  | Сору                      | total here=>  | \$ 156.00                      |
| ocal St                                 | andards You must use the IRS Local Standards   | to answer the  | questions in I  | ines 8-15.  |                           |               |                                |
|   | n information from the IRS, the U.S. Trustee Protect purposes into two parts:  | gram has div   | ided the IRS  | Local Standard  | l for hous                | sing for      |                                |
| Hous                                    | ing and utilities - Insurance and operating expe   | nses   |   |   |                           |               |                                |
|   |  |  |   |   |                           |               |                                |
| o answ                                  | ing and utilities - Mortgage or rent expenses<br>ver the questions in lines 8-9, use the U.S. Trust  |  |   |   |                           | g the link s  | specified in the               |
| o answ<br>eparate<br>. Hou              | •  | <b>be available</b> a<br><b>enses:</b> Using   | at the bankru<br>the number o   | ptcy clerk's offi   | ce.                       | ·             | •                              |
| o answ<br>eparate<br>. Hou<br>in th     | ver the questions in lines 8-9, use the U.S. Trust<br>e instructions for this form. This chart may also<br>using and utilities - Insurance and operating exp   | <b>be available</b> a<br><b>enses:</b> Using   | at the bankru<br>the number o   | ptcy clerk's offi   | ce.                       | ·             | •                              |
| o answ<br>eparate<br>. Hou<br>in th     | ver the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance  | be available apenses: Using and operating fill in the dolla  | at the bankru<br>the number of<br>g expenses.   | ptcy clerk's offi   | <b>ce.</b><br>ered in lin | ·             | •                              |
| o answeparate Hou in th Hou 9a.         | ver the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expanse dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5,   | be available a<br>benses: Using<br>a and operating<br>fill in the dolla<br>es.   | at the bankru<br>the number of<br>g expenses.<br>r amount   | ptcy clerk's offi<br>of people you ent                      | <b>ce.</b><br>ered in lin | e 5, fill \$_ | •                              |
| o answeparate Hou in th Hou 9a.         | rer the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  | be available a<br>benses: Using<br>and operating<br>fill in the dolla<br>es.<br>and other deb<br>add all amount                  | at the bankru the number of g expenses.  It amount tts secured by s that are  | ptcy clerk's offi<br>of people you ent                      | <b>ce.</b><br>ered in lin | e 5, fill \$_ | •                              |
| o answeparate Hou in th Hou 9a.         | rer the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6-   | be available a penses: Using a and operating fill in the dolla es.  and other deb add all amount 50 months afte                  | at the bankru the number of g expenses.  It amount this secured by s that are it you file  ge monthly                         | ptcy clerk's offi<br>of people you ent                      | <b>ce.</b><br>ered in lin | e 5, fill \$_ | •                              |
| o answeparate Hou in th Hou 9a.         | rer the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expected expected by the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expense.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  | be available a penses: Using a and operating fill in the dolla es.  and other deb add all amount 50 months afte                  | at the bankru the number of g expenses.  It amount this secured by s that are it you file  ge monthly                         | ptcy clerk's offi<br>of people you ent<br>your home.        | <b>ce.</b><br>ered in lin | e 5, fill \$_ | specified in the 571.0         |
| o answeparate Hou in th Hou 9a.         | rer the questions in lines 8-9, use the U.S. Trust instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expense.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the for bankruptcy. Next divide by 60.  Name of the creditor  Suntrust Bank  | be available a penses: Using a and operating fill in the dolla es.  and other deb add all amount 50 months afte  Avera payme     | at the bankru the number of g expenses.  It amount tts secured by s that are it you file  ge monthly ent                      | ptcy clerk's offi of people you ent your home.              | ce.<br>ered in lin        | e 5, fill \$_ | 571.0                          |
| o answeeparate Hou in the 9a.  9b.      | ver the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expense.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the for bankruptcy. Next divide by 60.  Name of the creditor  Suntrust Bank   | be available a penses: Using a and operating fill in the dolla es.  and other deb add all amount 50 months afte  Avera payme     | at the bankru the number of g expenses.  It amount this secured by s that are tryou file  ge monthly ent  3,060.37            | ptcy clerk's offi of people you ent your home.  Copy        | <b>ce.</b><br>ered in lin | e 5, fill \$_ | 571.0                          |
| o answeeparate Hou in the 9a.  9b.      | rer the questions in lines 8-9, use the U.S. Trust instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expense.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the for bankruptcy. Next divide by 60.  Name of the creditor  Suntrust Bank  | be available a penses: Using a and operating fill in the dolla es.  and other deb add all amount 50 months afte  Avera payme     | at the bankru the number of g expenses.  It amount this secured by s that are tryou file  ge monthly ent  3,060.37            | ptcy clerk's offi of people you ent your home.              | ce.<br>ered in lin        | e 5, fill \$_ | 571.0                          |
| o answeeparate Hou in the 9a.  9b.      | ver the questions in lines 8-9, use the U.S. Trust is instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expense.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the for bankruptcy. Next divide by 60.  Name of the creditor  Suntrust Bank   | be available a penses: Using a and operating fill in the dolla es.  and other deb add all amount 60 months afte  Avera payme  \$ | at the bankru the number of g expenses.  It amount this secured by s that are r you file  ge monthly ent  3,060.37            | ptcy clerk's offi of people you ent your home.              | ce.<br>ered in lin        | 3,060.37      | Repeat this amour on line 33a. |
| o answeparate . Hou in th . Hou 9a. 9b. | rer the questions in lines 8-9, use the U.S. Trust instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the for bankruptcy. Next divide by 60.  Name of the creditor  Suntrust Bank  9b. Total average monthly payment  Net mortgage or rent expense.  Subtract line 9b (total average monthly payment) | be available a benses: Using and operating fill in the dolla es.  and other debadd all amount 50 months afte  Averagayme  \$     | at the bankru the number of g expenses.  It amount this secured by s that are it you file  ge monthly ent  3,060.37  3,060.37 | ptcy clerk's offi of people you ent your home.  Copy here=> | s                         | 3,060.37 Copy | Repeat this amour on line 33a. |

| Debtor 1 | Brian J. Janusek  |                 |                   | Case number              | (if known)       |                                 |        |
|----------|---|-----------------|-------------------|--------------------------|------------------|---------------------------------|--------|
| 11.      | Local transportation expenses: Check the number of veh  | icles for w     | hich you claim    | an ownersł               | nip or operating | expense.                        |        |
|          | ☐ 0. Go to line 14.   |                 |                   |                          |                  |                                 |        |
|          | ☐ 1. Go to line 12.   |                 |                   |                          |                  |                                 |        |
|          | 2 or more. Go to line 12.   |                 |                   |                          |                  |                                 |        |
| 12.      | Vehicle operation expense: Using the IRS Local Standard   |                 |                   |                          |                  |                                 | 392.00 |
| 13.      | operating expenses, fill in the <i>Operating Costs</i> that apply for <b>Vehicle ownership or lease expense</b> : Using the IRS Loca                  | ,               | J                 |                          |                  | i.                              |        |
|          | You may not claim the expense if you do not make any loan more than two vehicles.   |                 |                   |                          |                  |                                 |        |
| Ve       | hicle 1 Describe Vehicle 1: 2013 Ford Explorer 80   | 000 mile        | es Good cond      | lition                   |                  |                                 |        |
| 13a      | Ownership or leasing costs using IRS Local Standard   |                 |                   | \$                       | 497.00           |                                 |        |
| 13b      | . Average monthly payment for all debts secured by Vehicle 1  | 1.              |                   |                          |                  |                                 |        |
|          | Do not include costs for leased vehicles.   |                 |                   |                          |                  |                                 |        |
|          | To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60. |                 |                   | t                        |                  |                                 |        |
|          | Name of each creditor for Vehicle 1   | Averaç<br>payme | ge monthly<br>ent |                          |                  |                                 |        |
|          | Gateway One Lending & Finance   | \$              | 614.95            |                          |                  |                                 |        |
|          |   |                 |                   | 7                        |                  | Repeat this                     |        |
|          | Total Average Monthly Payment   | \$              | 614.95            | Copy<br>here =>          | -\$614           | <ul> <li>amount on</li> </ul>   |        |
| 13c      | Net Vehicle 1 ownership or lease expense  |                 |                   | _                        |                  | Copy net                        |        |
|          | Subtract line 13b from line 13a. if this number is less than \$6  | 0, enter \$0    | 0                 |                          | 0.00             | Vehicle 1 expense here          | 0.00   |
|          |   |                 |                   | \$                       | 0.00             | =>                              | 0.00   |
| Ve       | hicle 2 Describe Vehicle 2: 2013 Mahindra 3016 3  | 70 hours        | s miles Good      | conditio                 | n                |                                 |        |
| 13d      | . Ownership or leasing costs using IRS Local Standard   |                 |                   | \$                       | 497.00           |                                 |        |
| 13e      | . Average monthly payment for all debts secured by Vehicle 2 leased vehicles.   | 2. Do not i     | nclude costs for  | r                        |                  |                                 |        |
|          | Name of each creditor for Vehicle 2   | Averaç<br>payme | ge monthly        |                          |                  |                                 |        |
|          | Farmers Ntl Bk Canfiel  | \$              | 166.60            |                          |                  |                                 |        |
|          |   |                 |                   | 7.0                      |                  |                                 |        |
|          | Total average monthly payment   | \$              | 166.60            | Copy<br>here<br>=> -\$ _ | 166.6            | Repeat this amount on line 33c. |        |
| 13f.     | Net Vehicle 2 ownership or lease expense  |                 |                   |                          |                  | Copy net                        |        |
|          | Subtract line 13e from line 13d. if this number is less than \$   | 0, enter \$0    | 0                 |                          |                  | Vehicle 2 expense here          |        |
|          |   |                 |                   | \$                       | 330.40           | => \$ _                         | 330.40 |
| 14.      | Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of  |                 |                   |                          |                  | in the                          | 0.00   |
| 15       | Additional public transportation expense: If you claimed  |                 | •                 | •                        |                  | · <del></del>                   |        |
| 13.      | also deduct a public transportation expense, you may fill in a not claim more than the IRS Local Standard for <i>Public Trans</i>                     | what you l      | believe is the ap |                          |                  |                                 | 0.00   |

| Oth | er Necessary Expenses  | In addition to the expense the following IRS categorie  |                                       | s listed above                          | , you are allowed your monthly expense  | s for |          |
|-----|--|---|---------------------------------------|---|---|-------|----------|
| 16. | self-employment taxes, so your pay for these taxes. H  | cial security taxes, and Medi<br>lowever, if you expect to recome the total monthly amoun                                 | care taxe<br>eive a tax               | s. You may ind<br>refund, you m         | nd local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.   | \$    | 1,104.65 |
| 17. | Involuntary deductions:  |   | luctions t                            | hat your job re                         | quires, such as retirement  |       |          |
|     | contributions, union dues,   |   | م مامنی ما                            |   | 11(k) contributions or payroll savings.   | \$    | 860.08   |
| 10  |  | , ,, ,  | •                                     | ,                                       | ( )   | Ψ_    |          |
| 18. | filing together, include pay   | ments that you make for you<br>or life insurance on your dep  | r spouse'                             | s term life insu                        | e insurance. If two married people are irance. I spouse's life insurance, or for any form   | \$    | 0.00     |
| 19. | Court-ordered payments   |   |                                       |   | by the order of a court or  |       |          |
|     |  | h as spousal or child suppor  |                                       |   | You will list these obligations in line 35.   | \$    | 0.00     |
| 20  | Education: The total mont  |   |                                       |   | · ·   | · —   |          |
| 20. | as a condition for your j  |   | educatioi                             | i tilat is eitilei                      | required.   |       |          |
|     |  | •   | at child if                           | no public educ                          | ation is available for similar services.  | \$    | 0.00     |
| 04  |  |   |                                       |   |   | _     |          |
| 21. |  | or any elementary or second   |                                       | •                                       | sitting, daycare, nursery, and preschool.   | \$    | 0.00     |
| 22. | Additional health care ex that is required for the hea   | penses, excluding insurar   | r depend                              | : The monthly<br>ents and that is       | amount that you pay for health care<br>s not reimbursed by insurance or paid  |       |          |
|     | · ·  | nce or health savings accou   |                                       |   |   | \$    | 0.00     |
| 23. | for you and your depender<br>phone service, to the exter<br>income, if it is not reimburs<br>Do not include payments for | ats, such as pagers, call wait<br>at necessary for your health a<br>led by your employer.<br>or basic home telephone, int | ing, callei<br>and welfa<br>ernet and | r identification,<br>are or that of you | you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment tount you previously deducted. | +\$_  | 0.00     |
| 24. | Add all of the expenses a Add lines 6 through 23.  | illowed under the IRS expe  | ense allo                             | wances.                                 |   | \$    | 4,798.13 |
| Add | ditional Expense Deduction   | These are additional of Note: Do not include a  |                                       |   |   |       |          |
| 25. |  |   |                                       |   | <b>ises.</b> The monthly expenses for health ly necessary for yourself, your spouse, or   | or    |          |
|     | Health insurance   |   | \$                                    | 305.24                                  |   |       |          |
|     | Disability insurance   |   | \$                                    | 0.00                                    |   |       |          |
|     | Health savings account   |   | + \$                                  | 0.00                                    | _   |       |          |
|     | Total  |   | \$                                    | 305.24                                  | Copy total here=>   | \$    | 305.24   |
|     | Do you actually spend this ☐ No. How much do y   | total amount? /ou actually spend?   |                                       |   | _   |       |          |
|     | Yes  |   | \$                                    |   |   |       |          |
| 26. | continue to pay for the reas   | sonable and necessary care  | and supp<br>no is unal                | oort of an elder<br>ble to pay for s    | e actual monthly expenses that you will<br>ly, chronically ill, or disabled member of<br>such expenses. These expenses may<br>s29A(b)   | \$    | 0.00     |
| 27. |  |   |                                       |   | nses that you incur to maintain the   |       |          |
|     |  | ily under the Family Violence p the nature of these expens  |                                       |   | es Act or other federal laws that apply.  | \$_   | 0.00     |

| Debtor 1 | Brian J. Janusek  | Ca   | se number (if kn | nown)  |                               |          |              |               |         |
|----------|---|--|------------------|--------|-------------------------------|----------|--------------|---------------|---------|
| 28.      | Additional home energy costs. Your hom line 8.  | e energy costs are included in your insuranc   | e and opera      | ating  | expens                        | es on    |              |               |         |
|          | If you believe that you have home energy of 8, then fill in the excess amount of home en      | osts that are more than the home energy cos<br>ergy costs  | ts included      | in ex  | penses                        | on lin   | е            |               |         |
|          | You must give your case trustee document amount claimed is reasonable and necessary           | ation of your actual expenses, and you must ry.  | show that th     | ne ad  | ditional                      | l        | \$           | S             | 0.00    |
| 29.      |   | ren who are younger than 18. The monthly pendent children who are younger than 18 younger than |                  |        |                               |          |              |               |         |
|          | You must give your case trustee document claimed is reasonable and necessary and r            | ation of your actual expenses, and you must ot already accounted for in lines 6-23.  | explain why      | the    | amount                        | į        |              |               |         |
|          | * Subject to adjustment on 4/01/19, and ever  | ery 3 years after that for cases begun on or a   | fter the date    | of a   | djustme                       | ent.     | \$           | S             | 0.00    |
| 30.      |   |  |                  |        |                               |          |              |               |         |
|          |   | onal allowance, go online using the link spec<br>o be available at the bankruptcy clerk's office   |                  | sepa   | rate                          |          |              |               |         |
|          | You must show that the additional amount of   | claimed is reasonable and necessary.   |                  |        |                               |          | \$           |               | 46.00   |
| 31.      | <b>Continuing charitable contributions.</b> The instruments to a religious or charitable orga | amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).  | the form of      | of cas | h or fin                      | ancial   |              |               |         |
|          | Do not include any amount more than 15%   | of your gross monthly income.  |                  |        |                               |          | \$           | ·             | 0.00    |
| 32.      | Add all of the additional expense deduct Add lines 25 through 31.                             | ions.  |                  |        |                               |          | \$           |               | 351.24  |
| Ded      | uctions for Debt Payment  |  |                  |        |                               |          |              |               |         |
| 33. I    | •   | n property that you own, including home 33a through 33e.   | mortgages        | s, veh | icle                          |          |              |               |         |
| -        | ·   | ent, add all amounts that are contractually du   | e to each se     | ecur   | ed                            |          |              |               |         |
|          | Mortgages on your home  |  |                  |        |                               |          |              | erage<br>ment | monthly |
| 33a.     | Copy line 9b here   |  |                  |        |                               | =>       | \$           | 3             | ,060.37 |
|          | Loans on your first two vehicles  |  |                  |        |                               |          |              |               |         |
| 33b.     | Copy line 13b here  |  |                  |        |                               | =>       | \$_          |               | 614.95  |
| 33c.     |   |  |                  |        |                               | =>       | \$_          |               | 166.60  |
| 33d.     |   |  |                  |        |                               |          |              |               |         |
| Nam      | ne of each creditor for other secured debt  | Identify property that secures the debt  |                  | incl   | es payn<br>ude tax<br>nsuranc | es       |              |               |         |
|          |   |  |                  |        | No                            |          |              |               |         |
|          |   |  |                  |        |                               |          |              |               |         |
|          | -NONE-  |  |                  |        | Yes                           |          | \$           |               |         |
|          | -NONE-  |  |                  |        | Yes                           |          | \$_          |               |         |
|          | -NONE-  |  |                  |        | Yes<br>No                     |          | \$_          |               |         |
|          | -NONE-  |  |                  |        |                               |          | \$ _<br>\$ _ |               |         |
|          | -NONE-  |  |                  |        | No                            |          | · –          |               |         |
|          | -NONE-  |  |                  |        | No<br>Yes                     | +        | · –          |               |         |
|          | -NONE-  |  |                  |        | No<br>Yes<br>No               | <b>+</b> | \$_          |               |         |

**Chapter 13 Calculation of Your Disposable Income** 

page 5

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| ☐ No.   | Go to line 35.   |  |  |                                 |              |                     |                                  |                 |          |
|---|--|--|--|---------------------------------|--------------|---------------------|----------------------------------|-----------------|----------|
| ■ Yes.  | State any amount that yo listed in line 33, to keep power, divide by 60 and fill   | possession of your proper  | ty (called the cure  | •                               |              |                     |                                  |                 |          |
| Name of the   | e creditor   | Identify property that   | secures the debt   |                                 | Tot          | tal cure amount     |                                  | onthly<br>nount | cure     |
| Suntrust  | Rank   | 154 Substation R<br>OH 44212 Medina  | a County   | Hills,                          |              | 40,000.00           |                                  | nount           | 666.67   |
| Sunnası   | Dalik  | Residence: Single  | e family Home  | \$                              | _            |                     | $\div 60 = \$$<br>$\div 60 = \$$ |                 | 000.07   |
|   |  |  |  | \$                              |              |                     | $\div 60 = +$$                   |                 |          |
|   |  |  |  | Total                           | \$           | 666.67              | Copy<br>total<br>here=>          | \$              | 666.6    |
| ■ No.   | Go to line 36. Fill in the total amount of   | all of these priority claims   | s. Do not include c  | urrent or                       |              |                     |                                  |                 |          |
|   |  | all of these priority claims   | s. Do not include c  | urrent or                       |              |                     |                                  |                 |          |
|   |  | uch as those you listed in   |  |                                 |              |                     |                                  |                 |          |
|   | Total amount of all past   | -due priority claims   |  |                                 | \$           | 0.00                | . 60                             | Ф               | 0.0      |
|   |  |  |  |                                 | Ψ_           | 0.00                | <del>-</del> 60                  | Ψ               | 0.0      |
| 6. Projecte   | ed monthly Chapter 13 pla  |  |  |                                 | \$ _         | 0.00                | - <del>-</del> 60<br>-           | Ψ               | 0.0      |
| Current<br>Office of<br>the Exec<br>To find a   |  | an payment s stated on the list issued for districts in Alabama ar es Trustees (for all other cludes your district, go online  | by the Administrated North Carolina) districts).   | tive<br>or by<br>led in the     | · –          | 0.00                | -                                |                 | 0.0      |
| Current<br>Office of<br>the Exec<br>To find a<br>separate   | ed monthly Chapter 13 pla<br>multiplier for your district as<br>f the United States Courts (<br>cutive Office for United Stat<br>list of district multipliers that ind   | an payment s stated on the list issued for districts in Alabama an es Trustees (for all other cludes your district, go online ist may also be available at t   | by the Administrated North Carolina) districts).   | tive<br>or by<br>led in the     | \$_          | \$                  | Copy tota                        |                 | 0.0      |
| Current Office of the Exec To find a separate Average   | multiplier for your district as<br>f the United States Courts (<br>cutive Office for United Stat<br>list of district multipliers that ind<br>instructions for this form. This I  | an payment s stated on the list issued for districts in Alabama ar es Trustees (for all other cludes your district, go online ist may also be available at to  | by the Administrated North Carolina) districts).   | tive<br>or by<br>led in the     | \$_          | \$                  | Copy tota                        |                 | 4,508.59 |
| Current Office of the Exec To find a separate Average   | multiplier for your district as fithe United States Courts (cutive Office for United Statist of district multipliers that inclinatoric for this form. This is monthly administrative explored the deductions for de  | an payment s stated on the list issued for districts in Alabama ar es Trustees (for all other cludes your district, go online ist may also be available at to  | by the Administrated North Carolina) districts).   | tive<br>or by<br>led in the     | \$_          | \$                  | Copy tota                        | <b>.</b>        |          |
| Current Office of the Exec To find a separate Average  7. Add al Add lin  | multiplier for your district as f the United States Courts (cutive Office for United Stat list of district multipliers that incinstructions for this form. This is monthly administrative explicit of the deductions for dees 33e through 36.  | an payment s stated on the list issued for districts in Alabama ar es Trustees (for all other cludes your district, go online ist may also be available at to pense  bt payment.   | by the Administrated North Carolina) districts).   | tive<br>or by<br>led in the     | \$_          | \$                  | Copy tota                        | <b>.</b>        |          |
| Current Office of the Exec To find a separate Average  7. Add all Add lin  Cotal Deduct 8. Add all Copy li                      | multiplier for your district as fethe United States Courts (cutive Office for United Statilist of district multipliers that indinstructions for this form. This is monthly administrative expending the deductions for dees 33e through 36.  | an payment s stated on the list issued for districts in Alabama ar es Trustees (for all other cludes your district, go online ist may also be available at to  pense  bt payment.  s.  | by the Administrated North Carolina) districts).   | tive<br>or by<br>led in the     | \$ _<br>X _  | \$                  | Copy tota                        | <b>.</b>        |          |
| Current Office of the Exec To find a separate Average  7. Add all Add lin  Cotal Deduct 8. Add all Copy li expens               | multiplier for your district as fithe United States Courts (cutive Office for United Statilist of district multipliers that incinstructions for this form. This is monthly administrative expenses and the allowed deductions of the allowed deductions no 24, All of the expenses and the united monthly administrative expenses and the allowed deductions on 24, All of the expenses and the united monthly administrative expenses and the allowed deductions on 24, All of the expenses and the united monthly administrative expenses and the united mon | an payment s stated on the list issued for districts in Alabama ar es Trustees (for all other cludes your district, go online ist may also be available at to pense  bt payment.  s. allowed under IRS                                       | by the Administrated North Carolina) districts). using the link specific bankruptcy clerk's                | or by<br>led in the<br>coffice. | \$ _ X       | \$                  | Copy tota                        | <b>.</b>        |          |
| Current Office of the Exec To find a separate Average  7. Add al Add lin  otal Deduc 8. Add all Copy li expens Copy li          | multiplier for your district as f the United States Courts (cutive Office for United Statilist of district multipliers that incinstructions for this form. This is monthly administrative expenses and the allowed deductions for the allowed deductions are 24, All of the expenses are allowances.   | an payment s stated on the list issued for districts in Alabama ares Trustees (for all other cludes your district, go online ist may also be available at topense  bt payment.  s. allowed under IRS expense deductions                      | by the Administrat<br>nd North Carolina)<br>districts).<br>using the link specifi<br>he bankruptcy clerk's | tive or by led in the soffice.  | \$ _ X       | \$                  | Copy tota                        | <b>.</b>        |          |
| Current Office of the Exec To find a separate Average  7. Add al Add lin Cotal Deduct 8. Add all Copy li expens Copy li Copy li | red monthly Chapter 13 plasmultiplier for your district as a fithe United States Courts (cutive Office for United States list of district multipliers that incinstructions for this form. This is monthly administrative expensive monthly administrative expensive 33e through 36.  Country of the deductions for defending of the allowed deductions are 24, All of the expenses are allowances.  The monthly of the expenses are allowances.  The monthly of the additional | an payment s stated on the list issued for districts in Alabama ares Trustees (for all other cludes your district, go online ist may also be available at the pense  bt payment.  s. allowed under IRS expense deductions s for debt payment | by the Administrat<br>nd North Carolina)<br>districts).<br>using the link specifi<br>he bankruptcy clerk's | tive or by sed in the soffice.  | \$ _ X [ : : | \$Copy total here=: | Copy tota<br>here=>              | <b>1</b>        |          |

☐ 122C-2

☐ 122C-1 ☐ 122C-2

☐ 122C-1

☐ 122C-2

☐ Decrease ☐ Increase

☐ Decrease

☐ Increase ☐ Decrease

| Brian J. Janusek | Case number (if known) |
|------------------|------------------------|
|                  |                        |

Debtor 1

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Brian J. Janusek

**Brian J. Janusek**Signature of Debtor 1

Date March 12, 2019

MM / DD / YYYY

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 09/01/2018 to 02/28/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: City of Twinsburg

Income by Month:

Debtor 1

| 6 Months Ago: | 09/2018            | \$6,029.30 |
|---------------|--------------------|------------|
| 5 Months Ago: | 10/2018            | \$6,036.02 |
| 4 Months Ago: | 11/2018            | \$9,054.04 |
| 3 Months Ago: | 12/2018            | \$6,036.03 |
| 2 Months Ago: | 01/2019            | \$6,110.04 |
| Last Month:   | 02/2019            | \$6,226.46 |
|               | Average per month: | \$6,581.98 |

| Brian J. Janusek | Case number (if known) |  |
|------------------|------------------------|--|
|------------------|------------------------|--|

## **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Debtor 1

Income for the Period **09/01/2018** to **02/28/2019**.

Line 4 & 40 - Child support income (including foster care and disability)
Source of Income: Child support from former spouse
Constant income of \$918.00 per month.

Non-CMI - Social Security Act Income Source of Income: Social Security Constant income of \$1,245.00 per month.

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

page 10
Best Case Bankruptcy

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# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | ¢310  | total foo          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Northern District of Ohio

| In re    | Brian J. Janusek  |   | Case No.  |                       |                 |
|----------|---|---|---|-----------------------|-----------------|
|          |   | Debtor(s)   | Chapter   | 13                    |                 |
|          | DISCLOSURE OF COMPENSA  | TION OF ATTO  | RNEY FOR D  | EBTOR(S)              |                 |
| C        | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: |   |   |                       |                 |
|          | For legal services, I have agreed to accept   |   | \$  | 4,000.00              |                 |
|          | Prior to the filing of this statement I have received   |   | \$  | 800.00                |                 |
|          | Balance Due   |   |   | 3,200.00              |                 |
| 2. T     | he source of the compensation paid to me was:   |   |   |                       |                 |
|          | ✓ Debtor  |   |   |                       |                 |
| 3. T     | he source of compensation to be paid to me is:  |   |   |                       |                 |
|          | ✓ Debtor  |   |   |                       |                 |
| 4.       | ✓ I have not agreed to share the above-disclosed compensation   | ion with any other person   | unless they are men   | nbers and associates  | of my law firm. |
|          | I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of   |   |   |                       | law firm. A     |
| 5. In    | n return for the above-disclosed fee, I have agreed to render   | legal service for all aspec   | ts of the bankruptcy  | case, including:      |                 |
| b.<br>c. | Analysis of the debtor's financial situation, and rendering a Preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and [Other provisions as needed]  Negotiations with secured creditors to reduce reaffirmation agreements and applications as 522(f)(2)(A) for avoidance of liens on households.                                     | t of affairs and plan whicl<br>d confirmation hearing, a<br>se to market value; ex<br>s needed; preparation | n may be required;<br>nd any adjourned he<br>emption planning | arings thereof;       | I filing of     |
| 6. B     | y agreement with the debtor(s), the above-disclosed fee does<br>Representation of the debtors in any dischar<br>any other adversary proceeding.   |   |   | ces, relief from st   | ay actions or   |
|          | CF  | ERTIFICATION  |   |                       |                 |
|          | certify that the foregoing is a complete statement of any agreenkruptcy proceeding.   | eement or arrangement for   | r payment to me for   | representation of the | debtor(s) in    |
| Ma       | arch 12, 2019   | /s/ David M. Bens   | son   |                       |                 |
| Da       | ite   | David M. Benson   |   |                       |                 |
|          |   | Signature of Attorne Benson Law Firn  |   |                       |                 |
|          |   | 1422 Euclid Aver  |   |                       |                 |
|          |   | Suite 970   |   |                       |                 |
|          |   | Cleveland, OH 44<br>216-241-2510 Fa   |   |                       |                 |
|          |   | David@DavidBei  |   |                       |                 |
|          |   | Name of law firm  |   |                       |                 |
|          |   | Transcoj van juni   |   |                       |                 |

## United States Bankruptcy Court Northern District of Ohio

| In re   | Brian J. Janusek                 |   | Case No.          |                       |  |  |  |
|---------|----------------------------------|---|-------------------|-----------------------|--|--|--|
|         |                                  | Debtor(s)   | Chapter           | 13                    |  |  |  |
|         | VERIFICATION OF CREDITOR MATRIX  |   |                   |                       |  |  |  |
| The abo | ove-named Debtor hereby verifies | that the attached list of creditors is true and cor | rrect to the best | of his/her knowledge. |  |  |  |
| Date:   | March 12, 2019                   | /s/ Brian J. Janusek                                |                   |                       |  |  |  |
|         |                                  | Brian J. Janusek                                    |                   |                       |  |  |  |
|         |                                  | Signature of Debtor                                 |                   |                       |  |  |  |

Farmers Ntl Bk Canfiel 20 S Broad St Canfield, OH 44406

Gateway One Lending & Finance 175 North Riverview Drive Suite 100 Anaheim, CA 92808

MD Custom Builders, LLC c/o Stephen A. Eckinger 1611 North Main Street, Suite A North Canton, OH 44720

Suntrust Bank Attn: Bankruptcy Po Box 85092 Mc Va-Wmrk-7952 Richmond, VA 23286